

REPORT OF RECEIPTS AND DISBURSEMENTS

1 / 159
BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE-PRESIDENT

1. NAME OF COMMITTEE (in full) Chris Dodd For President Inc		2. IDENTIFICATION NUMBER C00431379	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported PO Box 270701			
CITY, STATE, and ZIP CODE West Hartford CT 06127		3. IS THIS REPORT FOR : <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	

4. TYPE OF REPORT (Check here ☐ if this is a Termination Report.)

☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year End Report

Monthly Report Due On:

<input type="checkbox"/> February 20	<input type="checkbox"/> June 20	<input type="checkbox"/> October 20
<input checked="" type="checkbox"/> March 20	<input type="checkbox"/> July 20	<input type="checkbox"/> November 20
<input type="checkbox"/> April 20	<input type="checkbox"/> August 20	<input type="checkbox"/> December 20
<input type="checkbox"/> May 20	<input type="checkbox"/> September 20	<input type="checkbox"/> January 31

☐ Twelfth day report preceding _____ (Type of Election)
 election on _____ in the State of _____

☐ Thirtieth day report following the General Election on _____
 on _____

IS THIS REPORT AN AMENDMENT ☒ YES ☐ NO

5. COVERING PERIOD	FROM	THROUGH
	02/01/2008	02/29/2008

SUMMARY	6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD	2064454.00
	7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 2)	568412.23
	8. SUBTOTAL (Lines 6 and 7)	2632866.23
	9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2)	715874.70
	10. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 9 from 8)	1916991.53
	11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P)	0.00
	12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P)	1286568.12
	13. EXPENDITURES SUBJECT TO LIMITATION	14664229.37
NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES	14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2)	10491209.21
	15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2)	14664469.37

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct, and complete.

Type or Print Name of Treasurer Kathryn Damato	Date 05/20/2008
Signature of Treasurer	

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. All previous versions of FEC FORM 3P are obsolete and should no longer be used.

For further information contact:	Federal Election Commission 999 E Street, N.W. Washington, DC 20463	Toll Free 800-424-9530 Local 202-694-1100
---	---	--

FEC FORM 3P
(01/2001)

DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS**2 / 159**

(PAGE 2, FEC FORM 3P)

Name of committee (in full)

Chris Dodd For President Inc

Report Covering the Period

From: 02/01/2008

To: 02/29/2008

I. RECEIPTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P)	.....	501956.46	501956.46
17. CONTRIBUTIONS (other than loans) FROM :			
(a) Individuals/Persons Other Than Political Committees	.....	56081.18	9896160.91
(b) Political Party Committees	.....	0.00	100.00
(c) Other Political Committees	.....	7500.00	642898.30
(d) The Candidate	.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d))		63581.18	10539159.21
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	.....	0.00	4739005.00
19. LOANS RECEIVED:			
(a) Loans Received From or Guaranteed by Candidate	.....	0.00	0.00
(b) Other Loans	.....	0.00	1302811.25
(c) TOTAL LOANS (Add 19(a) and 19(b))	.....	0.00	1302811.25
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :			
(a) Operating	.....	2874.59	37906.92
(b) Fundraising	.....	0.00	240.00
(c) Legal and Accounting	.....	0.00	0.00
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c))		2874.59	38146.92
21. OTHER RECEIPTS (Dividend, Interest, etc.)	.....	0.00	55536.06
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21)	.....	568412.23	17176614.90
II. DISBURSEMENTS			
23. OPERATING EXPENDITURES	.....	176868.24	14702376.29
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	.....	0.00	0.00
25. FUNDRAISING DISBURSEMENTS	.....	0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS	.....	0.00	0.00
27. LOAN REPAYMENTS MADE :			
(a) Repayment of Loans made or Guaranteed by Candidate	.....	0.00	0.00
(b) Other Repayments	.....	501956.46	501956.46
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))	.....	501956.46	501956.46
28. REFUNDS OF CONTRIBUTIONS TO :			
(a) Individuals/Persons Other Than Political Committees	.....	37050.00	47950.00
(b) Political Party Committees	.....	0.00	0.00
(c) Other Political Committees	.....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c))	.....	37050.00	47950.00
29. OTHER DISBURSEMENTS	.....	0.00	6000.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	.....	715874.70	15258282.75
III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)			
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	.....	0.00	

ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE 3 / 159
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)
 (PAGE 3, FEC FORM 3P)

1. NAME OF COMMITTEE (in full)

Chris Dodd For President Inc

ADDRESS (number and street)

PO Box 270701

CITY, STATE, and ZIP CODE

West Hartford

CT

06127

2. IDENTIFICATION NUMBER

C00431379

ALLOCATION BY STATE

STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE	STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE
Alabama	0.00	0.00	Nebraska	0.00	0.00
Alaska	0.00	0.00	Nevada	0.00	31412.23
Arizona	0.00	0.00	New Hampshire	0.00	700252.03
Arkansas	0.00	0.00	New Jersey	0.00	0.00
California	0.00	0.00	New Mexico	0.00	0.00
Colorado	0.00	0.00	New York	0.00	0.00
Connecticut	0.00	0.00	North Carolina	0.00	0.00
Delaware	0.00	0.00	North Dakota	0.00	0.00
District of Columbia	0.00	41.21	Ohio	0.00	0.00
Florida	0.00	0.00	Oklahoma	0.00	0.00
Georgia	0.00	0.00	Oregon	0.00	0.00
Hawaii	0.00	0.00	Pennsylvania	0.00	0.00
Idaho	0.00	0.00	Rhode Island	0.00	0.00
Illinois	0.00	0.00	South Carolina	0.00	533.78
Indiana	0.00	0.00	South Dakota	0.00	0.00
Iowa	32501.75	2634497.72	Tennessee	0.00	0.00
Kansas	0.00	0.00	Texas	0.00	0.00
Kentucky	0.00	0.00	Utah	0.00	0.00
Louisiana	0.00	0.00	Vermont	0.00	0.00
Maine	0.00	0.00	Virginia	0.00	0.00
Maryland	0.00	68.00	Washington	0.00	0.00
Massachussetts	0.00	0.00	West Virginia	0.00	0.00
Michigan	0.00	0.00	Wisconsin	0.00	0.00
Minnesota	0.00	0.00	Wyoming	0.00	0.00
Mississippi	0.00	0.00	Puerto Rico	0.00	0.00
Missouri	0.00	0.00	Guam	0.00	0.00
Montana	0.00	0.00	Virgin Islands	0.00	0.00
			TOTALS	32501.75	3366804.97

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 4 / 159

<input checked="" type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Federal Funds

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

166779.15

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 4 / 2 0 0 8

Amount of Each Receipt this Period

166779.15

Treasury Payment

Transaction ID: A77C6687C0F8E4131A58

B.

Full Name (Last, First, Middle Initial)

Federal Funds

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325490.99

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 1 / 2 0 0 8

Amount of Each Receipt this Period

158711.84

Treasury Payment

Transaction ID: AB8D7B2A4FC4E46DEAA8

C.

Full Name (Last, First, Middle Initial)

Federal Funds

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

501956.46

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 8 / 2 0 0 8

Amount of Each Receipt this Period

176465.47

Federal Funds

Transaction ID: A345C54E3DD53405EA8A

SUBTOTAL of Receipts This Page (optional)

501956.46

TOTAL This Period (last page this line number only)

501956.46

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 5 / 159

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Sharon Adams

Mailing Address

9722 Autumn Harvest

City

Houston

State

TX

Zip Code

77064

FEC ID number of contributing
federal political committee.

Name of Employer
Helix ESG

Occupation

Vice President

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: AC4E30B6BC0AE4474858

B.

Full Name (Last, First, Middle Initial)

Ms. Marilyn Alverio

Mailing Address

156 Conestoga Way

City

Glastonbury

State

CT

Zip Code

06033-3362

FEC ID number of contributing
federal political committee.

Name of Employer
Ethnic Marketing Solutions

Occupation

Consultant

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: A8A4A57631EA6466FBA5

C.

Full Name (Last, First, Middle Initial)

Frank Bell

Mailing Address

28 Holly Hill Rd

City

Wilmington

State

DE

Zip Code

19809

FEC ID number of contributing
federal political committee.

Name of Employer
self

Occupation

Training Consultant

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 2 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: AB7445025CB7046D1841

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 / 159

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Ms. Cathleen Bemis

Mailing Address

6619 Leland Way

#315

City

Los Angeles

State

CA

Zip Code

90028-3800

FEC ID number of contributing
federal political committee.

Name of Employer
LACDPH

Occupation

Epidemiologist

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

648.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: AB8ECEC5706D648CBB90

B.

Full Name (Last, First, Middle Initial)

Ms. Kathy A Blackwelder

Mailing Address

315 NW 3rd

City

Grants Pass

State

OR

Zip Code

97526-1957

FEC ID number of contributing
federal political committee.

Name of Employer
self

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: A2ED35253C0E1442C8B7

C.

Full Name (Last, First, Middle Initial)

Mr. James Kevin Burns

Mailing Address

17 West Haycock Point Road

City

Branford

State

CT

Zip Code

06405-5307

FEC ID number of contributing
federal political committee.

Name of Employer
Precision Combustion, Inc.

Occupation

President

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2179.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

25.00

Transaction ID: ACCA7B36FA194404AB44

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 / 159

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Rosanne Cahn

Mailing Address

60 Sutton Place South

City

New York

State

NY

Zip Code

10022

FEC ID number of contributing
federal political committee.

Name of Employer
N/A

Occupation

N/a

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 2 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: A0F2C51FD7F934140A8F

B.

Full Name (Last, First, Middle Initial)

Donald Campbell

Mailing Address

11 County Rd 30

City

Mt. Hope

State

AL

Zip Code

35651

FEC ID number of contributing
federal political committee.

Name of Employer
Retired

Occupation

Data Analyst

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

25.00

Transaction ID: A9E05CAF61F8B4BD0AF2

C.

Full Name (Last, First, Middle Initial)

Mr. Keith Campbell

Mailing Address

3333 East Florida

Unit 122

City

Denver

State

CO

Zip Code

80210-2539

FEC ID number of contributing
federal political committee.

Name of Employer
Retired

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: A4CBAAE3AEBB340DBBE4

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 / 159

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Ms. Mary Lou Carter

Mailing Address

109 Smithfield Drive

City

Endicott

State

NY

Zip Code

13760-4329

FEC ID number of contributing
federal political committee.

Name of Employer
Town of Vestal, NY

Occupation

Library clerk

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

523.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: A09B0190C32A04E7F818

B.

Full Name (Last, First, Middle Initial)

Dr. William J Cibes, Jr.

Mailing Address

31 Woodland St

City

Hartford

State

CT

Zip Code

06105

FEC ID number of contributing
federal political committee.

Name of Employer
N/A

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

25.00

Transaction ID: A33B5563B5B0F4BD1800

C.

Full Name (Last, First, Middle Initial)

Ms. Amy Cousins

Mailing Address

220 Central Park South

7B

City

New York

State

NY

Zip Code

10019-1417

FEC ID number of contributing
federal political committee.

Name of Employer
Self-Employed

Occupation

Physician

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 0 6 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: A72E5CD1DB72443A7A82

SUBTOTAL of Receipts This Page (optional)

325.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 / 159

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Mr. John J Cullinane

Mailing Address

91 Common Street

City

Dedham

State

MA

Zip Code

02026-4035

FEC ID number of contributing
federal political committee.

Name of Employer
The Cullinane Group

Occupation
President

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 8 / 2 0 0 8

Amount of Each Receipt this Period

500.00

Transaction ID: AA4F4CDC541C2412D81F

B.

Full Name (Last, First, Middle Initial)

Mr. John Cunningham

Mailing Address

970 Tulare Avenue

City

Albany

State

CA

Zip Code

94706-2540

FEC ID number of contributing
federal political committee.

Name of Employer
Retired

Occupation
Retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

25.00

Transaction ID: A05AB3326934F416AB77

C.

Full Name (Last, First, Middle Initial)

Ms. Lynn Dash

Mailing Address

108 Jumping Brook Road

City

Lincroft

State

NJ

Zip Code

07738-1417

FEC ID number of contributing
federal political committee.

Name of Employer
Retired

Occupation
Retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: A0D0087344CA54DCC93E

SUBTOTAL of Receipts This Page (optional)

625.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 / 159

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Mr. Dino J. De Concini

Mailing Address

3125 Garfield Street NW

City

Washington

State

DC

Zip Code

20008-3538

FEC ID number of contributing
federal political committee.

Name of Employer
N/A

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: AA56BD6520EBC4E2A847

B.

Full Name (Last, First, Middle Initial)

Justin Dowling

Mailing Address

21 Linden St apt 120

City

Quincy

State

MA

Zip Code

02170

FEC ID number of contributing
federal political committee.

Name of Employer
N/A

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

347.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

322.00

Transaction ID: A233B8B2506214A8AAEA

C.

Full Name (Last, First, Middle Initial)

Tuffield Ellinwood

Mailing Address

2029 Hawthorne Terr

City

Novato

State

CA

Zip Code

94945-1128

FEC ID number of contributing
federal political committee.

Name of Employer
Charles Schwab

Occupation

Software Consultant

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: AFD669CB8C62540FF94B

SUBTOTAL of Receipts This Page (optional)

472.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 / 159

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Nancy Fertig

Mailing Address

7 Cobb Island Drive

City

Greenwich

State

CT

Zip Code

06830

FEC ID number of contributing
federal political committee.

Name of Employer
N/A

Occupation

Homemaker

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: A7A861E6D09FC4B32A87

B.

Full Name (Last, First, Middle Initial)

Mr. Matt Fleury

Mailing Address

21-C Capitol Avenue

City

Hartford

State

CT

Zip Code

06106-1707

FEC ID number of contributing
federal political committee.

Name of Employer
CT Science Center

Occupation

Manager

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

873.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 6 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: A93DDB409B4FE41F4AA5

C.

Full Name (Last, First, Middle Initial)

Pat Flierl

Mailing Address

7755 N. Fancher

City

Clovis

State

CA

Zip Code

93619-9027

FEC ID number of contributing
federal political committee.

Name of Employer
Government

Occupation

Attorney

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: AA60A723234454954A61

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 / 159

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Karen J. Fowler

Mailing Address

457 Russell Blvd

City

Davis

State

CA

Zip Code

95616

FEC ID number of contributing
federal political committee.

Name of Employer
Rockingham Fireworks

Occupation
Manager

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: A572E77038A1241A39CA

B.

Full Name (Last, First, Middle Initial)

Lauren D Frank

Mailing Address

2271 Lake Road

City

Ontario

State

NY

Zip Code

14519-9719

FEC ID number of contributing
federal political committee.

Name of Employer
Self-Employed

Occupation
Consultant

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

268.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

25.00

Transaction ID: AD294088B70B34372996

C.

Full Name (Last, First, Middle Initial)

Stephanie Friedman

Mailing Address

2933 Magnolia St

City

Berkeley

State

CA

Zip Code

94705

FEC ID number of contributing
federal political committee.

Name of Employer
N/A

Occupation
Retired singer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

25.00

Transaction ID: AB4D73C4502D548DDBDF

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 / 159

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Robert Gabel

Mailing Address

27 Pinckney Rd

City

Red Bank

State

NJ

Zip Code

07701

FEC ID number of contributing
federal political committee.

Name of Employer
Self, MD

Occupation
Physician

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 6 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: A680F708D0FD14FF8A64

B.

Full Name (Last, First, Middle Initial)

Jay Gold

Mailing Address

1320 44th Street

City

Des Moines

State

IA

Zip Code

50311-2508

FEC ID number of contributing
federal political committee.

Name of Employer
Sel-Employed

Occupation
database programmer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: AE097DDC50EEF43008ED

C.

Full Name (Last, First, Middle Initial)

Mrs. Julie Clark Goodyear

Mailing Address

333 Christian Street

City

Wallingford

State

CT

Zip Code

06492-3818

FEC ID number of contributing
federal political committee.

Name of Employer
Foundation for a Greater
Opportunity

Occupation
Executive Director

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: AEA856EFBE02C4844ACF

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 159

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Bobette Gorden

Mailing Address

2248 S. Forest

City

Tempe

State

AZ

Zip Code

85282

FEC ID number of contributing
federal political committee.

Name of Employer
newInformation

Occupation

lecture agent

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: A52AAAFB6D614FEC9BA

B.

Full Name (Last, First, Middle Initial)

Julie Gurung

Mailing Address

5 Cherry Circle

City

Pomona

State

NY

Zip Code

10970

FEC ID number of contributing
federal political committee.

Name of Employer
HiFi Trader, Ltd.

Occupation

Entrepreneur

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: A29F84200AFD5494C977

C.

Full Name (Last, First, Middle Initial)

Michael Harahan

Mailing Address

810 Highland Dr

City

La Canada Flintrid

State

CA

Zip Code

91011

FEC ID number of contributing
federal political committee.

Name of Employer
Sel-Employed

Occupation

Consultant

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

1000.00

Transaction ID: A45BA1CFDEE0D4A408B4

SUBTOTAL of Receipts This Page (optional)

1150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 / 159

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Mr. Jeffrey Hartung

Mailing Address

11923 Trail Crest Drive

City

San Diego

State

CA

Zip Code

92131-6149

FEC ID number of contributing
federal political committee.

Name of Employer
Ascenta Therapeutics

Occupation

Executive Management

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

25.00

Transaction ID: A91C47FAF32304694929

B.

Full Name (Last, First, Middle Initial)

Edson C. Hendricks

Mailing Address

2336 Wilbur Ave

City

San Diego

State

CA

Zip Code

92109-2357

FEC ID number of contributing
federal political committee.

Name of Employer
Self Employed

Occupation

Computer design engineer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: A413A9029E34A4FCD805

C.

Full Name (Last, First, Middle Initial)

Ms. Theresa Henkelmann

Mailing Address

5 Georgetown North

City

Greenwich

State

CT

Zip Code

06831-5233

FEC ID number of contributing
federal political committee.

Name of Employer
Thomas Henkelmann-Homeste-
ad Inn

Occupation

Restaurateur

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: A167E78B591C14A77AC9

SUBTOTAL of Receipts This Page (optional)

325.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 / 159

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Janet A.E. Hine

Mailing Address

67 Sill Lane

City

Old Lyme

State

CT

Zip Code

06371-1135

FEC ID number of contributing
federal political committee.

Name of Employer
N/A

Occupation
Retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

25.00

Transaction ID: AFC4131BD13C6483D99D

B.

Full Name (Last, First, Middle Initial)

Lyle W. Horn

Mailing Address

1485 Vincent Ave

City

Watsontown

State

PA

Zip Code

17777

FEC ID number of contributing
federal political committee.

Name of Employer
N/A

Occupation
Retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

25.00

Transaction ID: AC43B28CB2A0F4F6EB21

C.

Full Name (Last, First, Middle Initial)

Joy Howell

Mailing Address

1050 Connecticut Ave Nw, 10th Floor

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

Name of Employer
Cambridge Strategic Partners

Occupation
Consultant

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 1 / 2 0 0 8

Amount of Each Receipt this Period

1000.00

Transaction ID: AAE683BEE87C94C6D904

SUBTOTAL of Receipts This Page (optional)

1050.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 / 159

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Barry Hufker

Mailing Address

1348 Hawthorne Place

City

Richmond Heights

State

MO

Zip Code

63117

FEC ID number of contributing
federal political committee.

Name of Employer
Webster University

Occupation

Associate Professor

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: AC9B0EAE3D7C84000B12

B.

Full Name (Last, First, Middle Initial)

Alice M Hutchinson

Mailing Address

153 Rockwell Rd

City

Bethel

State

CT

Zip Code

06801-3005

FEC ID number of contributing
federal political committee.

Name of Employer
Canterbury School

Occupation

Development Director

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

925.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

25.00

Transaction ID: AE3F0CA8F5DB049BDBA7

C.

Full Name (Last, First, Middle Initial)

Ms. Carolyn Jordan

Mailing Address

204 Highland Avenue

City

Arlington

State

MA

Zip Code

02476-7851

FEC ID number of contributing
federal political committee.

Name of Employer
University of New Hampshire

Occupation

Scientist

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 3 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: A94A3FF1EBC6344EBB96

SUBTOTAL of Receipts This Page (optional)

525.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 / 159

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Micki Kaufman

Mailing Address

245 8th Ave, #188

City

New York

State

NY

Zip Code

10011

FEC ID number of contributing
federal political committee.

Name of Employer
Show & Tell Productions

Occupation

Sr. Project Manager

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 3 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: A0C7677971AD3402BB9C

B.

Full Name (Last, First, Middle Initial)

Charles Kennedy

Mailing Address

3400 W. 30th Ave

City

Anchorage

State

AK

Zip Code

99517

FEC ID number of contributing
federal political committee.

Name of Employer
Kennedy Engineering Co.

Occupation

Civil Engineer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 4 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: A42178D920583407CB27

C.

Full Name (Last, First, Middle Initial)

Todd L Kenner

Mailing Address

1 Regent Circle

City

Basking Ridge

State

NJ

Zip Code

07920-1900

FEC ID number of contributing
federal political committee.

Name of Employer
Simon Property Group

Occupation

Attorney

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

383.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

25.00

Transaction ID: AC4B40DB4035B43F386A

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 / 159

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Mr. Keith Kiser

Mailing Address

6625 Meadows West Drive South

City

Fort Worth

State

TX

Zip Code

76132-1131

FEC ID number of contributing
federal political committee.

Name of Employer
XTO Energy

Occupation
Engineer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

150.00

Transaction ID: A3F8DDB87AAF742F9A55

B.

Full Name (Last, First, Middle Initial)

Mr. Peter H Kleban

Mailing Address

65 Dunning Blvd.

City

Bangor

State

ME

Zip Code

04401-3003

FEC ID number of contributing
federal political committee.

Name of Employer
University of Maine System

Occupation
Professor

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: AF0AE6921E125448CBE9

C.

Full Name (Last, First, Middle Initial)

Ms. Molly Knorr

Mailing Address

30 Pembroke Hill

City

Farmington

State

CT

Zip Code

06032-1461

FEC ID number of contributing
federal political committee.

Name of Employer
Health Advocate, Inc.

Occupation
VP, Product Development

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 4 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: A465EFE51959C4A23974

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 159

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Matthew Krane

Mailing Address

1451 N. Kings Rd

City

Los Angeles

State

CA

Zip Code

90069

FEC ID number of contributing
federal political committee.

Name of Employer
Sel-Employed

Occupation

Attorney

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

1000.00

Transaction ID: A44E89492225A4BB7804

B.

Full Name (Last, First, Middle Initial)

Richard Larson

Mailing Address

141 S. Scoville Ave

City

Oak Park

State

IL

Zip Code

60302

FEC ID number of contributing
federal political committee.

Name of Employer
Univ. of Illinois at Chic-
ago

Occupation

Retired Professor

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: A30E0AA54DC5F40D597A

C.

Full Name (Last, First, Middle Initial)

Justin Ludwig

Mailing Address

425 Bellevue Way Se, Apt 65

City

Bellevue

State

WA

Zip Code

98004

FEC ID number of contributing
federal political committee.

Name of Employer
Software AG

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: A91E922E8686D45D282C

SUBTOTAL of Receipts This Page (optional)

1150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 / 159

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Cathleen McGarity

Mailing Address

4503 Crestway Dr

City

Austin

State

TX

Zip Code

78731

FEC ID number of contributing
federal political committee.

Name of Employer
N/A

Occupation

N/a

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

25.00

Transaction ID: A21238DBD70564D7FB16

B.

Full Name (Last, First, Middle Initial)

Ms. Clara McIver

Mailing Address

15 Lillian Street

City

Tabernacle

State

NJ

Zip Code

08088-9351

FEC ID number of contributing
federal political committee.

Name of Employer
N/A

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

258.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 3 / 2 0 0 8

Amount of Each Receipt this Period

25.00

Transaction ID: AA1005A78FA4B4627B3D

C.

Full Name (Last, First, Middle Initial)

Christine Meredith

Mailing Address

982-1 Alpine Terrace

City

Sunnyvale

State

CA

Zip Code

94086

FEC ID number of contributing
federal political committee.

Name of Employer
Intuit Inc

Occupation

Executive Assistant

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

25.00

Transaction ID: A1C4C7445180F4809934

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 / 159

☐ 16 ☒ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18
☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Mr. Joseph Mohbat

Mailing Address

551 Pacific Street

City

Brooklyn

State

NY

Zip Code

11217-1902

FEC ID number of contributing
federal political committee.

Name of Employer
NYC Law Department

Occupation
Lawyer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

25.00

Transaction ID: A160066A13E4B41D9B03

B.

Full Name (Last, First, Middle Initial)

Judith A. Montgomery

Mailing Address

4 Bently Circle Ct

City

Chesterfield

State

MO

Zip Code

63107

FEC ID number of contributing
federal political committee.

Name of Employer
Aurora Systems Group

Occupation
IT

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 2 / 1 2 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: A3C26F801CB34408AA8A

C.

Full Name (Last, First, Middle Initial)

Dorothy A Mrowka

Mailing Address

399 Lebanon Ave.

City

Colchester

State

CT

Zip Code

06415-2112

FEC ID number of contributing
federal political committee.

Name of Employer
N/A

Occupation
Retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: AC3B7C0EDE20143C5BC1

SUBTOTAL of Receipts This Page (optional)

325.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 23 / 159

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Patrick Mulloy

Mailing Address

304 W. Masonic View Ave

City

Alexandria

State

VA

Zip Code

22301-2419

FEC ID number of contributing
federal political committee.

Name of Employer
Self-Employed

Occupation
Attorney

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2510.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 0 8

Amount of Each Receipt this Period

35.00

Transaction ID: AD93DF8AA341C46698CF

B.

Full Name (Last, First, Middle Initial)

John Nicholson

Mailing Address

6006 Corewood Ln

City

Bethesda

State

MD

Zip Code

20816

FEC ID number of contributing
federal political committee.

Name of Employer
Pillsbury Winthrop Shaw
Pittman LLP

Occupation
Attorney

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

25.00

Transaction ID: A5D1B5B027417447F851

C.

Full Name (Last, First, Middle Initial)

Mr. John J Nicholson

Mailing Address

21700 Oxnard Street

Suite 400

City

Woodland Hills

State

CA

Zip Code

91367-7559

FEC ID number of contributing
federal political committee.

Name of Employer
Proteus Films Inc.

Occupation
Actor

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 4 / 2 0 0 8

Amount of Each Receipt this Period

500.00

Transaction ID: AC0B9E3094FF446C2983

SUBTOTAL of Receipts This Page (optional)

560.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 / 159

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Mr. William D O'Brien

Mailing Address

PO Box 17368

City

Tampa

State

FL

Zip Code

33682

FEC ID number of contributing
federal political committee.

Name of Employer
Tampa Sports Authority

Occupation

Maintenance

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 4 / 2 0 0 8

Amount of Each Receipt this Period

200.00

Transaction ID: A17AC0F86EA244857A90

B.

Full Name (Last, First, Middle Initial)

Brian O'Dwyer

Mailing Address

52 Duane St

City

New York

State

NY

Zip Code

10007

FEC ID number of contributing
federal political committee.

Name of Employer
O'Dwyer and Bernstien

Occupation

Attorney

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

1000.00

Transaction ID: A4BB2003D48D3418DA1C

C.

Full Name (Last, First, Middle Initial)

Mr. William E. Olmsted

Mailing Address

401 Main Street

Apt. 730

City

Keokuk

State

IA

Zip Code

52632

FEC ID number of contributing
federal political committee.

Name of Employer
Presbyterian Church of Wa-
rsaw IL

Occupation

Pastor

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: AFB9BB21BFBE943A4883

SUBTOTAL of Receipts This Page (optional)

1450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 25 / 159

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Mrs. Sharon Palmer

Mailing Address

9 Laurel Glen Road

City

Quaker Hill

State

CT

Zip Code

06375-1211

FEC ID number of contributing
federal political committee.

Name of Employer
AFT Connecticut

Occupation

Information Requested

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: A9F092A705D8E4A559D0

B.

Full Name (Last, First, Middle Initial)

Benjamin Palumbo

Mailing Address

1204 S. Oakcrest Rd

City

Arlington

State

VA

Zip Code

22202

FEC ID number of contributing
federal political committee.

Name of Employer
Palumbo & Cerrell

Occupation

Consultant

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: AFC61A631E64F42658A6

C.

Full Name (Last, First, Middle Initial)

Mr. Richard Parenteau

Mailing Address

518 Kinross Ct.

City

Sunnyvale

State

CA

Zip Code

94087-4615

FEC ID number of contributing
federal political committee.

Name of Employer
Quickcycle Consulting, LLC

Occupation

Consultant

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: AB99DC47782D44F43990

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 26 / 159

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Ms. Elizabeth Paterson

Mailing Address

79 Independence Drive

City

Mansfield Center

State

CT

Zip Code

06250-1541

FEC ID number of contributing
federal political committee.

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: A1A0A5FC96933452DBAF

B.

Full Name (Last, First, Middle Initial)

Mr. Peer Pederson

Mailing Address

161 N Clark Street

City

Chicago

State

IL

Zip Code

60603

FEC ID number of contributing
federal political committee.

Name of Employer
Pederson & Houpt

Occupation

Attorney

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 8 / 2 0 0 8

Amount of Each Receipt this Period

2300.00

Transaction ID: A56421AC14CD846E2BB2

C.

Full Name (Last, First, Middle Initial)

Carolyn Pirillo

Mailing Address

7208 Rio Tamega Dr

City

Elk Grove

State

CA

Zip Code

95757

FEC ID number of contributing
federal political committee.

Name of Employer
State of California

Occupation

Attorney

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: A2645F1C742264659B07

SUBTOTAL of Receipts This Page (optional)

2400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 159

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Walter Plourde

Mailing Address

4 Randall Ct , #2

City

Annapolis

State

MD

Zip Code

21401

FEC ID number of contributing
federal political committee.

Name of Employer
Jenzabar, Inc.

Occupation

Software Engineer

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: A3F8827D7F6BE43CCBDD

B.

Full Name (Last, First, Middle Initial)

William David Pooser

Mailing Address

120 S. Denton Tap Rd, Suite 450c P

City

Coppell

State

TX

Zip Code

75019

FEC ID number of contributing
federal political committee.

Name of Employer
Alford Media Services

Occupation

It Manager

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: AD05863CE7EF24CA8AF8

C.

Full Name (Last, First, Middle Initial)

Peter Prestley

Mailing Address

44 Capitlo Ave , S201

City

Hartford

State

CT

Zip Code

06106

FEC ID number of contributing
federal political committee.

Name of Employer
Madsen Prestley & Parente-
au LLC

Occupation

Attorney

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: ADA059D06D6E4448083F

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 28 / 159

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Mr. Kevin F. Quigley

Mailing Address

1600 North Oak St.

City

Arlington

State

VA

Zip Code

22209-2735

FEC ID number of contributing
federal political committee.

Name of Employer
National Peace Corps Asso-
ciation

Occupation
President

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 4 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: AEE314FC795E94BB29E3

B.

Full Name (Last, First, Middle Initial)

Mr. Robert Quill

Mailing Address

760 Daniell Dr. SE

City

Smyrna

State

GA

Zip Code

30080-1104

FEC ID number of contributing
federal political committee.

Name of Employer
U.S. Court of Appeals 11th
Cir. (Ret.)

Occupation
Information Requested

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

221.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: ACA7611E1A88C49768B1

C.

Full Name (Last, First, Middle Initial)

Glenn Rennels

Mailing Address

1232 Harriet St

City

Palo Alto

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

Name of Employer
TPMG Inc.

Occupation
Physician

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: ABD8A64A904254304963

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 29 / 159

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Jesse Edward Rosbrow

Mailing Address

160 W. 9th St , Apt 3

City

Brooklyn

State

NY

Zip Code

11231

FEC ID number of contributing
federal political committee.

Name of Employer
Self Employed

Occupation

Theatre Artist/Freelancer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: A26B449A18FE142A8B43

B.

Full Name (Last, First, Middle Initial)

Joseph Ruane

Mailing Address

8101 Dowling Cove #A

City

Austin

State

TX

Zip Code

78745-6907

FEC ID number of contributing
federal political committee.

Name of Employer
N/A

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

25.00

Transaction ID: A99F1EAC493614BA9942

C.

Full Name (Last, First, Middle Initial)

Paul Rubell

Mailing Address

438 Ashland Ave

City

Santa Monica

State

CA

Zip Code

90405

FEC ID number of contributing
federal political committee.

Name of Employer
Kensho Productions, Inc.

Occupation

Film Editor

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: A2A47D666F3E54CB9B35

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 30 / 159

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Andy Ruina

Mailing Address

227 Bryant Ave

City

Ithaca

State

NY

Zip Code

14850

FEC ID number of contributing
federal political committee.

Name of Employer
Cornell University

Occupation
Professor

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: A982ED2DF532F4ED0B66

B.

Full Name (Last, First, Middle Initial)

John Russ

Mailing Address

P.O. Box 2281

City

Asheville

State

NC

Zip Code

28802

FEC ID number of contributing
federal political committee.

Name of Employer
Reindeer Graphics, Inc.

Occupation
Software Engineer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.05

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

25.01

Transaction ID: A1EEBC955789849228DC

C.

Full Name (Last, First, Middle Initial)

Robert Rzeszutek

Mailing Address

197 Riggs St

City

Oxford

State

CT

Zip Code

06478-1144

FEC ID number of contributing
federal political committee.

Name of Employer
Memry Corp.

Occupation
Logistics

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

25.00

Transaction ID: A25800DE9117D42248DA

SUBTOTAL of Receipts This Page (optional)

100.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 31 / 159

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Terri Scantling

Mailing Address

473 Simsbury Rd

City

Bloomfield

State

CT

Zip Code

06002

FEC ID number of contributing
federal political committee.

Name of Employer
N/A

Occupation
Activist

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: AA9AA73C7B1BF4916BB8

B.

Full Name (Last, First, Middle Initial)

Ms. Christine Kimball Shewmaker

Mailing Address

1409 Springcreek Drive

City

Woodland

State

CA

Zip Code

95776-5759

FEC ID number of contributing
federal political committee.

Name of Employer
Self-Employed

Occupation
Consultant

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: A628CAD078B93468A8A7

C.

Full Name (Last, First, Middle Initial)

Elizabeth Shiffrin

Mailing Address

3561 Verdugo Vista Terrace

City

Los Angeles

State

CA

Zip Code

90065

FEC ID number of contributing
federal political committee.

Name of Employer
Black Phoenix

Occupation
Perfumer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: A1DB45608F9AA499DA18

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 159

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Viravanh Siegel

Mailing Address

5322 NW 55th Terrace

City

Coconutcreek

State

FL

Zip Code

33073

FEC ID number of contributing
federal political committee.

Name of Employer
United states Postal Serv.

Occupation

Letter carrier

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: AFB2921FBFC0D4179B6D

B.

Full Name (Last, First, Middle Initial)

Russell Smith

Mailing Address

4227 Summit Pt Rd

City

Charles Town

State

WV

Zip Code

25414

FEC ID number of contributing
federal political committee.

Name of Employer
Defense Information Systems Agency

Occupation

Computer Systems Administrator

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: A1B3ADA861DA04C918F8

C.

Full Name (Last, First, Middle Initial)

Eric Spofford

Mailing Address

10334 SE Martins St

City

Portland

State

OR

Zip Code

97266

FEC ID number of contributing
federal political committee.

Name of Employer
Irwin Hodson Co

Occupation

Pressman

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 6 / 2 0 0 8

Amount of Each Receipt this Period

25.00

Transaction ID: AC64E3469988942BE935

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 33 / 159

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Victoria Steven

Mailing Address

379 Walden St #2

City

Cambridge

State

MA

Zip Code

02138

FEC ID number of contributing
federal political committee.

Name of Employer
Moshe Safdie & Associates

Occupation
Architect

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 4 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: AF99D10B04C9C40B49B6

B.

Full Name (Last, First, Middle Initial)

Ms. Laurie Stevens

Mailing Address

164R Skeet Club Road

City

Durham

State

CT

Zip Code

06422-1009

FEC ID number of contributing
federal political committee.

Name of Employer
N/A

Occupation
Retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

25.00

Transaction ID: A07DAE2F3BBB24719A57

C.

Full Name (Last, First, Middle Initial)

Mr. Paul A Strasburg

Mailing Address

P.O. Box 7445

City

Menlo Park

State

CA

Zip Code

94026-7445

FEC ID number of contributing
federal political committee.

Name of Employer
Retired

Occupation
Retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

223.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: A08F150F8D04545629D7

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 34 / 159

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Ms. Gloria Sturman

Mailing Address

415 South 6th Street 2941 Red Springs Drive

City State Zip Code
Las Vegas NV 89101-6937

FEC ID number of contributing
federal political committee.

Name of Employer
Wilson, Elser, Moskowitz,
Edelman & Di

Occupation
Attorney

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: A7699F81AAC954F25936

B.

Full Name (Last, First, Middle Initial)

Nuna Teal

Mailing Address

554 Grove Hill Road

City State Zip Code
Lincoln VT 05443-8820

FEC ID number of contributing
federal political committee.

Name of Employer
Self-Employed

Occupation
Consultant

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

25.00

Transaction ID: A39F7486E2DB642C987F

C.

Full Name (Last, First, Middle Initial)

John Tehan

Mailing Address

16 Harding St

City State Zip Code
Milford MA 01757

FEC ID number of contributing
federal political committee.

Name of Employer
Fidelity Investments

Occupation
Software Engineer

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.16

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

25.00

Transaction ID: AD8327CFB6D384DE9A78

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 35 / 159

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Lawrence Tesler

Mailing Address

351 Grove Dr

City

Portola Valley

State

CA

Zip Code

94028

FEC ID number of contributing
federal political committee.

Name of Employer
Yahoo! Inc.

Occupation
Executive

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1025.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

25.00

Transaction ID: A58A0B84F41A64808A67

B.

Full Name (Last, First, Middle Initial)

Mr. Scott Thompson

Mailing Address

3000 Sheridan Blvd.

City

Lincoln

State

NE

Zip Code

68502-4217

FEC ID number of contributing
federal political committee.

Name of Employer
N/A

Occupation
Retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: A0B1834ABCD A2456F93B

C.

Full Name (Last, First, Middle Initial)

George Ubogy

Mailing Address

319 Cognewaugh Rd

City

Cos Cob

State

CT

Zip Code

06807-1310

FEC ID number of contributing
federal political committee.

Name of Employer
Self-Employed

Occupation
Physician

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

199.00

Transaction ID: A37B0FAE9A4754F82966

SUBTOTAL of Receipts This Page (optional)

324.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 36 / 159

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Owen Walton

Mailing Address

P o Box 99807

City

Seattle

State

WA

Zip Code

98199

FEC ID number of contributing
federal political committee.

Name of Employer
FluencyGroup, Inc.

Occupation

Business person/student

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: A1BF16AB2E3EB4B30981

B.

Full Name (Last, First, Middle Initial)

Ms. Jane Whitcomb

Mailing Address

2325 Lancashire Drive

City

Ann Arbor

State

MI

Zip Code

48105-1359

FEC ID number of contributing
federal political committee.

Name of Employer
University of Michigan

Occupation

Student

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: A29C0E585DB8C4FC3908

C.

Full Name (Last, First, Middle Initial)

Jolene Wohlers

Mailing Address

2309 West 10th St

City

Austin

State

TX

Zip Code

78703

FEC ID number of contributing
federal political committee.

Name of Employer
Herring & Irwin, LLP

Occupation

Paralegal

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: A706D177F18FF44E9BDF

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 159

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Mr. Gardner E Wright

Mailing Address

45 Primrose Lane

City

Bristol

State

CT

Zip Code

06010-3323

FEC ID number of contributing
federal political committee.

Name of Employer
Self- Employed

Occupation

Lobbyist/ Consultant

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: A292C21A6620E40D7BAA

B.

Full Name (Last, First, Middle Initial)

Rolen Yoshinaga

Mailing Address

1963 Wasatch Dr

City

Salt Lake City

State

UT

Zip Code

84108

FEC ID number of contributing
federal political committee.

Name of Employer
VTI

Occupation

Manager

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

25.00

Transaction ID: AEB9643AA5E64450A925

C.

Full Name (Last, First, Middle Initial)

n/a Unitemized Donors

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

40100.17

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

40100.17

Unitemized Donors

Transaction ID: U1EEE0D69DE0642E3940

SUBTOTAL of Receipts This Page (optional)

40175.17

TOTAL This Period (last page this line number only)

56081.18

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 159

(check only one)

☐ 16 ☐ 17a ☐ 17b ☒ 17c ☐ 17d ☐ 18
☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

The NEA Fund for Children PAC

Mailing Address

1201 16th Street NW

Suite 420

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 2 / 2 4 / 2 0 0 8

Amount of Each Receipt this Period

2500.00

Transaction ID: A236417058960434BB1A

B.

Full Name (Last, First, Middle Initial)

The NEA Fund for Children PAC

Mailing Address

1201 16th Street NW

Suite 420

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 2 / 2 4 / 2 0 0 8

Amount of Each Receipt this Period

2500.00

Transaction ID: ACE23BE08EEE446B49D8

C.

Full Name (Last, First, Middle Initial)

US Team PAC

Mailing Address

100 West Putnam Avenue

City

Greenwich

State

CT

Zip Code

06830

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 2 / 2 4 / 2 0 0 8

Amount of Each Receipt this Period

2500.00

Transaction ID: A5CCE92282DDC40E1B90

SUBTOTAL of Receipts This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

7500.00

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 39 / 159

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Cronin Law Firm, PLC

Mailing Address

666 Walnut Street

Suite 1850

City

Des Moines

State

IA

Zip Code

50309-3911

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 1 4 / 2 0 0 8

Amount of Each Receipt this Period

850.00

Transaction ID: A740AC6C11B134DBEAFC

B.

Full Name (Last, First, Middle Initial)

U. S. Postal Service

Mailing Address

800 K Street

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

675.23

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 0 7 / 2 0 0 8

Amount of Each Receipt this Period

675.23

Refund on deposit

Transaction ID: A4D0F2F8B59004D8EB59

C.

Full Name (Last, First, Middle Initial)

Mr. Lawrence Beltrame

Mailing Address

1115 Caulder Avenue

City

Des Moines

State

IA

Zip Code

50315-7541

FEC ID number of contributing
federal political committee.

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

212.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 1 4 / 2 0 0 8

Amount of Each Receipt this Period

125.00

Transaction ID: A7C6C65D7445248B69C9

SUBTOTAL of Receipts This Page (optional)

1650.23

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 40 / 159

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Mr. Lawrence Beltrame

Mailing Address

1115 Caulder Avenue

City

Des Moines

State

IA

Zip Code

50315-7541

FEC ID number of contributing
federal political committee.

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

212.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 4 / 2 0 0 8

Amount of Each Receipt this Period

87.00

Transaction ID: A68872E5EB42E40E4BB1

B.

Full Name (Last, First, Middle Initial)

Mr. F.M. Brown

Mailing Address

4590 River Forest Circle

City

Johnston

State

IA

Zip Code

50131-1338

FEC ID number of contributing
federal political committee.

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 4 / 2 0 0 8

Amount of Each Receipt this Period

420.00

Transaction ID: A0C7FFB0FDE414EB4B5D

C.

Full Name (Last, First, Middle Initial)

Mr. Jesse G Harris

Mailing Address

975 Applewood Lane

City

Wauke

State

IA

Zip Code

50263-8267

FEC ID number of contributing
federal political committee.

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 4 / 2 0 0 8

Amount of Each Receipt this Period

500.00

Transaction ID: AB766A61592F2474BBBF

SUBTOTAL of Receipts This Page (optional)

1007.00

TOTAL This Period (last page this line number only)

2657.23

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 41 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Zin's	Transaction ID: BFB4D2B53DE9142D6AE0 Date of Disbursement																				
Mailing Address 227 2nd Ave SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	2		2	0	0	7												
City Cedar Rapids State Zip Code	Amount of Each Disbursement this Period																				
Purpose of Disbursement Food & Beverage	<table border="1"> <tr> <td colspan="10">318.18</td> </tr> </table>	318.18																			
318.18																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
[MEMO ITEM]																					
B. Full Name (Last, First, Middle Initial) 4 Brothers Restaurant	Transaction ID: B430E98F49F9B421D84B Date of Disbursement																				
Mailing Address 1430 Two Rivers Blvd.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	0		2	0	0	7												
City Le Mars State IA Zip Code	Amount of Each Disbursement this Period																				
Purpose of Disbursement Food & Beverage	<table border="1"> <tr> <td colspan="10">264.66</td> </tr> </table>	264.66																			
264.66																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
[MEMO ITEM]																					
C. Full Name (Last, First, Middle Initial) Advantage Payroll Services	Transaction ID: B837EB021941E431180B Date of Disbursement																				
Mailing Address 126 Marrow Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	1		2	0	0	8												
City Auburn State ME Zip Code 04210	Amount of Each Disbursement this Period																				
Purpose of Disbursement Processing Fee	<table border="1"> <tr> <td colspan="10">1084.28</td> </tr> </table>	1084.28																			
1084.28																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1084.28

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 42 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Advantage Payroll Services	Transaction ID: B804065006CBD46D5B0B Date of Disbursement																				
Mailing Address 126 Marrow Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	5		2	0	0	8												
City Auburn State ME Zip Code 04210 Purpose of Disbursement Processing Fee Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>83.76</td> </tr> </table>	83.76																			
83.76																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
B. Full Name (Last, First, Middle Initial) Advantage Payroll Services	Transaction ID: B667E0890A2C6471FAA4 Date of Disbursement																				
Mailing Address 126 Marrow Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	5		2	0	0	8												
City Auburn State ME Zip Code 04210 Purpose of Disbursement Processing Fee Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>36.78</td> </tr> </table>	36.78																			
36.78																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
C. Full Name (Last, First, Middle Initial) Airport Holiday Inn	Transaction ID: BFC3E1329C5DC4B14AAD Date of Disbursement																				
Mailing Address 6111 Fleur Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	5		2	0	0	8												
City Des Moines State IA Zip Code 50321-2851 Purpose of Disbursement Lodging Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>123.15</td> </tr> </table>	123.15																			
123.15																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type [MEMO ITEM]																				

SUBTOTAL of Disbursements This Page (optional)

120.54

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 43 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Allied Telecom	Transaction ID: BF08D75C3AF8E4ACCB5 Date of Disbursement																				
Mailing Address PO BOx 758792	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	9		2	0	0	8												
City Baltimore State MD Zip Code 21275 Purpose of Disbursement Internet Services Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">850.00</td> </tr> </table>	850.00																			
850.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Allied Telecom	Transaction ID: B2B6F50C551C94745BDC Date of Disbursement																				
Mailing Address PO BOx 758792	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	9		2	0	0	8												
City Baltimore State MD Zip Code 21275 Purpose of Disbursement Internet Services Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">850.00</td> </tr> </table>	850.00																			
850.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Allied Telecom	Transaction ID: B943EB661ECA841A9B9C Date of Disbursement																				
Mailing Address PO BOx 758792	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	9		2	0	0	8												
City Baltimore State MD Zip Code 21275 Purpose of Disbursement Internet Services Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">850.00</td> </tr> </table>	850.00																			
850.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

2550.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 44 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 981535	Transaction ID: B237EAAC0073F4CFEA7D Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 8 / 2 0 0 8</div> </div>
City El Paso State TX Zip Code 79998-1535 Purpose of Disbursement See Below Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>50000.00</div> <div>Category/Type</div>
B. Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 981535 City El Paso State TX Zip Code 79998-1535 Purpose of Disbursement Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BE9096223CB5F41DDA5F Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 0 / 2 0 0 7</div> </div> Amount of Each Disbursement this Period <div>19.00</div> <div>Category/Type</div> <p>[MEMO ITEM]</p>
C. Full Name (Last, First, Middle Initial) AMTRAK Mailing Address Washington Union Station 60 Massachusetts Ave City Washington State DC Zip Code 20002 Purpose of Disbursement Transportation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B009CCDC7636348C4A76 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 1 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>6.00</div> <div>Category/Type</div> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)

50000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 45 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Anthem Blue Cross Blue Shield

Mailing Address 370 Bassett Road

City
North Haven

State
CT

Zip Code
06473-4201

Purpose of Disbursement
Health Insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B73F8C92A8FDF479D9F8

Date of Disbursement

02 / 14 / 2008

Amount of Each Disbursement this Period

2600.86

B.

Full Name (Last, First, Middle Initial)

Aristotle Publishing

Mailing Address 205 Pennsylvania Ave

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement
Subscription Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B7BFBE8E420C840F1BDC

Date of Disbursement

02 / 29 / 2008

Amount of Each Disbursement this Period

9000.00

C.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address P.O. Box 830175
 Acct Analysis

City
Dallas

State
TX

Zip Code
75283-0175

Purpose of Disbursement
Service Charge

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B72C110A5930B424EA42

Date of Disbursement

02 / 05 / 2008

Amount of Each Disbursement this Period

318.09

SUBTOTAL of Disbursements This Page (optional)

11918.95

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 46 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Best Western Clear Lake	Transaction ID: B96D887C68789454CAF1 Date of Disbursement
Mailing Address I 35 & Highway 18 Exit 194	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 0 / 2 0 0 7</div> </div>
City Clear Lake State IA Zip Code 50428	Amount of Each Disbursement this Period
Purpose of Disbursement Lodging	<div>70.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Best Western Clear Lake	Transaction ID: B6C009BDB3E3644F782B Date of Disbursement
Mailing Address I 35 & Highway 18 Exit 194	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 0 / 2 0 0 7</div> </div>
City Clear Lake State IA Zip Code 50428	Amount of Each Disbursement this Period
Purpose of Disbursement Lodging	<div>70.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Best Western Clear Lake	Transaction ID: B84FEC0CD33874F73AE4 Date of Disbursement
Mailing Address I 35 & Highway 18 Exit 194	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 0 / 2 0 0 7</div> </div>
City Clear Lake State IA Zip Code 50428	Amount of Each Disbursement this Period
Purpose of Disbursement Lodging	<div>80.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 47 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Capanna Coffee & Gelato

Mailing Address 136 S Dubuque St

City State Zip Code
Iowa City IA

Purpose of Disbursement
Food & Beverage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B53502409C28B42F2B41

Date of Disbursement

/ /

Amount of Each Disbursement this Period

304.43

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Caseys

Mailing Address One SE Convenience Blvd

City State Zip Code
Ankeny IA 50021

Purpose of Disbursement
Food & Beverage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B767A9ECAD4AD4E68B0D

Date of Disbursement

/ /

Amount of Each Disbursement this Period

400.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Caseys

Mailing Address One SE Convenience Blvd

City State Zip Code
Ankeny IA 50021

Purpose of Disbursement
Food & Beverage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B00C36DB880624C8CBD6

Date of Disbursement

/ /

Amount of Each Disbursement this Period

42.16

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 48 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Caseys	Transaction ID: BD0ACD59C1C924FEB9B5 Date of Disbursement																				
Mailing Address One SE Convenience Blvd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	2		2	0	0	8												
City Ankeny State IA Zip Code 50021	Amount of Each Disbursement this Period																				
Purpose of Disbursement Food & Beverage	<table border="1"> <tr> <td colspan="10">51.18</td> </tr> </table>	51.18																			
51.18																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Caseys	Transaction ID: B1641964BC0844A8EB1B Date of Disbursement																				
Mailing Address One SE Convenience Blvd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	3		2	0	0	8												
City Ankeny State IA Zip Code 50021	Amount of Each Disbursement this Period																				
Purpose of Disbursement Food & Beverage	<table border="1"> <tr> <td colspan="10">46.31</td> </tr> </table>	46.31																			
46.31																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Central Lighting & Equipment	Transaction ID: B1E60DD729B37479798C Date of Disbursement																				
Mailing Address 675 NE 45th Place	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	3		2	0	0	8												
City Des Moines State IA Zip Code 50313-2446	Amount of Each Disbursement this Period																				
Purpose of Disbursement Equipment Rental	<table border="1"> <tr> <td colspan="10">596.50</td> </tr> </table>	596.50																			
596.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 49 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Centro Restaurant	Transaction ID: B5C56B4F4EE3A42A4B14 Date of Disbursement
Mailing Address 1011 Locust Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 3 / 2 0 0 8</div> </div>
City Des Moines State IA Zip Code 50309-2811	Amount of Each Disbursement this Period
Purpose of Disbursement Food & Beverage	<div> <div></div> <div>16.54</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
B. Full Name (Last, First, Middle Initial) Centro Restaurant	Transaction ID: B68A8B14D72004FF5A28 Date of Disbursement
Mailing Address 1011 Locust Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 4 / 2 0 0 8</div> </div>
City Des Moines State IA Zip Code 50309-2811	Amount of Each Disbursement this Period
Purpose of Disbursement Food & Beverage	<div> <div></div> <div>34.33</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
C. Full Name (Last, First, Middle Initial) Comcast	Transaction ID: BDC14E54C392F485294B Date of Disbursement
Mailing Address 508-D S Van Dorn Street	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 2 7 / 2 0 0 7</div> </div>
City Alexandria State VA Zip Code 22304	Amount of Each Disbursement this Period
Purpose of Disbursement Cable Services	<div> <div></div> <div>336.88</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 50 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Cooper General Global

Mailing Address 351 Boston Post Rd

City State Zip Code
Miami FL

Purpose of Disbursement
Non-Durable Goods

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B37B3AE80F75B4372B82

Date of Disbursement

12 / 26 / 2007

Amount of Each Disbursement this Period

6662.70

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Costco

Mailing Address 999 Lake Drive

City State Zip Code
Issaquah WA 98027

Purpose of Disbursement
Office Supplies

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B6040527D63C24A7ABB8

Date of Disbursement

12 / 27 / 2007

Amount of Each Disbursement this Period

141.88

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

CT Dept Taxation

Mailing Address 25 Sigourney St.

City State Zip Code
Hartford CT 06106

Purpose of Disbursement
Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B855762AE99504366989

Date of Disbursement

02 / 01 / 2008

Amount of Each Disbursement this Period

816.78

SUBTOTAL of Disbursements This Page (optional)

816.78

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 51 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) CT Dept Taxation</p> <p>Mailing Address 25 Sigourney St.</p> <p>City Hartford State CT Zip Code 06106</p> <p>Purpose of Disbursement Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BDE7D16AF59684A22805</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 368.18</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Dave Lou Realty</p> <p>Mailing Address 70 Mechanic Street, Unit 1</p> <p>City Manchester State NH Zip Code 03101-1924</p> <p>Purpose of Disbursement Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B9C7CFF4B6E0F4AC7BEF</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 1500.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) DC Dept Taxation</p> <p>Mailing Address P.O. Box 470</p> <p>City Washington State DC Zip Code 20044</p> <p>Purpose of Disbursement Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B3D48FE68E3BB4E768D8</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 669.96</p>

SUBTOTAL of Disbursements This Page (optional)

2538.14

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 52 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) DC Dept Taxation Mailing Address P.O. Box 470	Transaction ID: B072CBBDC4776470CA16 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20044 Purpose of Disbursement Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>392.38</div>
B. Full Name (Last, First, Middle Initial) Designer Graphics Mailing Address City Tyler State TX Zip Code Purpose of Disbursement Advertising Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B532CD19E64584521989 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 2 7 / 2 0 0 7</div> </div> Amount of Each Disbursement this Period <div>1085.77</div> [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) Drink More Water Mailing Address Montgomery County Airpark 7595-A Rickenbacker Drive City Gaithersburg State MD Zip Code 20879 Purpose of Disbursement Water Delivery Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B96DFE8AF3F3D4D74AE4 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 4 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>75.96</div> [MEMO ITEM]
SUBTOTAL of Disbursements This Page (optional) ▶	<div>392.38</div>
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 53 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Drink More Water

Mailing Address Montgomery County Airpark
7595-A Rickenbacker Drive

City Gaithersburg State MD Zip Code 20879

Purpose of Disbursement
Water Delivery

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: BF56A75C084E548FBA98

Date of Disbursement

/ /

Amount of Each Disbursement this Period

15.50

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Eleventh Hour Creative, LLC

Mailing Address 684 Broadview Terrace

City Hartford State CT Zip Code 06106

Purpose of Disbursement
Design & print

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: BCA2ECA7D2A504D8EAA0

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1886.46

C.

Full Name (Last, First, Middle Initial)

Enterprise Rent A Car

Mailing Address

City Hartford State CT Zip Code

Purpose of Disbursement
Transportation

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B65CB6E0CC35649F9B50

Date of Disbursement

/ /

Amount of Each Disbursement this Period

319.86

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

1886.46

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 54 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Enterprise Rent A Car</p> <p>Mailing Address</p> <p>City Hartford State CT Zip Code</p> <p>Purpose of Disbursement Transportation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B8317256C1ED14FAB86C</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 0 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 815.19</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Enterprise Rent A Car</p> <p>Mailing Address</p> <p>City Hartford State CT Zip Code</p> <p>Purpose of Disbursement Transportation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BDEBBEDE03C8945CBB11</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) FedEx</p> <p>Mailing Address P.O. Box 371461</p> <p>City Pittsburgh State PA Zip Code 15250-7461</p> <p>Purpose of Disbursement Monthly Courier Charges</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BAA3E5DBA8C854061850</p> <p>Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 8 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period 255.26</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ►

0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 55 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Ford Credit Mailing Address P.O. Box 220564	Transaction ID: B905DBE6BA86D40E2AAB Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 7 / 2 0 0 8</div> </div>
City Pittsburgh State PA Zip Code 15257-2564 Purpose of Disbursement Car Lease Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>87.72</div> <div>Category/Type</div>
B. Full Name (Last, First, Middle Initial) Ford Credit Mailing Address P.O. Box 220564 City Pittsburgh State PA Zip Code 15257-2564 Purpose of Disbursement Car Lease Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BC800E9B475EA419E9A0 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 7 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>75.49</div> <div>Category/Type</div>
C. Full Name (Last, First, Middle Initial) Freeman Mailing Address P.O. Box 650036 City Dallas State TX Zip Code 75265-0036 Purpose of Disbursement Event Rental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BB8FEE57C86B245AEA0C Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 9 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>609.05</div> <div>Category/Type</div> <p>[MEMO ITEM]</p>
SUBTOTAL of Disbursements This Page (optional) ► <div>163.21</div>	
TOTAL This Period (last page this line number only) ►	

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 56 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Freeman Mailing Address P.O. Box 650036	Transaction ID: BFE804E423C254C16A16 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 9 / 2 0 0 8</div> </div>
City Dallas State TX Zip Code 75265-0036 Purpose of Disbursement Event Rental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <div>2774.87</div> [MEMO ITEM]
B. Full Name (Last, First, Middle Initial) Great Scott Moving Mailing Address 3409 52nd Avenue City Hyattsville State MD Zip Code 20781-1003 Purpose of Disbursement MOving Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: BC092BC26E54B48878FE Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 1 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>2190.00</div>
C. Full Name (Last, First, Middle Initial) Hampton Inn Mailing Address 3583 ST. Mathews Road City Orangeburg State SC Zip Code 29118 Purpose of Disbursement Lodging Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B02F13E41E01143CB937 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 2 6 / 2 0 0 7</div> </div> Amount of Each Disbursement this Period <div>89.07</div> [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ►

2190.00

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 57 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)
Hertz

Mailing Address 333 W. Harbor Drive

City San Diego State CA Zip Code 92101

Purpose of Disbursement
Transportation

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: BC92787F020394DE2915

Date of Disbursement

12 / 26 / 2007

Amount of Each Disbursement this Period

246.28

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Hertz

Mailing Address 333 W. Harbor Drive

City San Diego State CA Zip Code 92101

Purpose of Disbursement
Transportation

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: BF0B1290EA63646F39DA

Date of Disbursement

12 / 27 / 2007

Amount of Each Disbursement this Period

159.09

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Hertz

Mailing Address 333 W. Harbor Drive

City San Diego State CA Zip Code 92101

Purpose of Disbursement
Transportation

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: BF2D01B6AC88A47ED8D0

Date of Disbursement

01 / 05 / 2008

Amount of Each Disbursement this Period

763.11

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 58 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Home Depot</p> <p>Mailing Address 2455 Falls Ferry Road</p> <p>City Atlanta State GA Zip Code 30339</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BF2F6C0E646384F24A93</p> <p>Date of Disbursement 12 / 28 / 2007</p> <p>Amount of Each Disbursement this Period 221.90</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Home Depot</p> <p>Mailing Address 2455 Falls Ferry Road</p> <p>City Atlanta State GA Zip Code 30339</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B201A3F8F0E024BF89BF</p> <p>Date of Disbursement 12 / 28 / 2007</p> <p>Amount of Each Disbursement this Period 30.15</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Hotel Vetro</p> <p>Mailing Address 201 South Linn Street</p> <p>City Iowa City State IA Zip Code 52240</p> <p>Purpose of Disbursement Lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BD7260C18B29B4D01A83</p> <p>Date of Disbursement 12 / 21 / 2007</p> <p>Amount of Each Disbursement this Period 178.08</p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) ► 0.00</p>	
<p>TOTAL This Period (last page this line number only) ►</p>	

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 59 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Hotel Winneshiek</p> <p>Mailing Address 104 East Water Street</p> <p>City Decorah State IA Zip Code</p> <p>Purpose of Disbursement Food & Beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B45EFF94B9CE041E9A7D</p> <p>Date of Disbursement 12 / 26 / 2007</p> <p>Amount of Each Disbursement this Period 246.38</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Hotel Winneshiek</p> <p>Mailing Address 104 East Water Street</p> <p>City Decorah State IA Zip Code</p> <p>Purpose of Disbursement Hotel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B6BFBD83F1066428F84E</p> <p>Date of Disbursement 12 / 27 / 2007</p> <p>Amount of Each Disbursement this Period 122.08</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Hotel Winneshiek</p> <p>Mailing Address 104 East Water Street</p> <p>City Decorah State IA Zip Code</p> <p>Purpose of Disbursement Hotel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B36DC9D2685554657A60</p> <p>Date of Disbursement 12 / 27 / 2007</p> <p>Amount of Each Disbursement this Period 110.88</p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) ► 0.00</p>	
<p>TOTAL This Period (last page this line number only) ►</p>	

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 60 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Hotel Winneshiek</p> <p>Mailing Address 104 East Water Street</p> <p>City Decorah State IA Zip Code</p> <p>Purpose of Disbursement Hotel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B8B4C8363EBBC4967AFF</p> <p>Date of Disbursement 12 / 27 / 2007</p> <p>Amount of Each Disbursement this Period 122.08</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Hotwire</p> <p>Mailing Address 333 Market Street Suite 100</p> <p>City San Francisco State CA Zip Code 94105</p> <p>Purpose of Disbursement Lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B6C7480CF3FDC4049B5C</p> <p>Date of Disbursement 01 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 120.28</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) HyVee</p> <p>Mailing Address 170 E. Washington</p> <p>City Mt. Pleasant State IA Zip Code 52641</p> <p>Purpose of Disbursement Food & Beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B1A6098334F2F447FB85</p> <p>Date of Disbursement 12 / 26 / 2007</p> <p>Amount of Each Disbursement this Period 1.49</p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) ► 0.00</p>	
<p>TOTAL This Period (last page this line number only) ►</p>	

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 61 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) HyVee	Transaction ID: BDD5B45434BB34ACD9BA Date of Disbursement																				
Mailing Address 170 E. Washington	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	7		2	0	0	7												
City Mt. Pleasant State IA Zip Code 52641	Amount of Each Disbursement this Period																				
Purpose of Disbursement Food & Beverage	<table border="1"> <tr> <td colspan="10">1500.00</td> </tr> </table>	1500.00																			
1500.00																					
Candidate Name	[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) HyVee	Transaction ID: B281FA4370AC948C4804 Date of Disbursement																				
Mailing Address 170 E. Washington	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	9		2	0	0	7												
City Mt. Pleasant State IA Zip Code 52641	Amount of Each Disbursement this Period																				
Purpose of Disbursement Food & Beverage	<table border="1"> <tr> <td colspan="10">143.39</td> </tr> </table>	143.39																			
143.39																					
Candidate Name	[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) HyVee	Transaction ID: B8FCDB5DCE413416090F Date of Disbursement																				
Mailing Address 170 E. Washington	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	0		2	0	0	7												
City Mt. Pleasant State IA Zip Code 52641	Amount of Each Disbursement this Period																				
Purpose of Disbursement Food & Beverage	<table border="1"> <tr> <td colspan="10">56.46</td> </tr> </table>	56.46																			
56.46																					
Candidate Name	[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
SUBTOTAL of Disbursements This Page (optional)	<table border="1"> <tr> <td colspan="10">0.00</td> </tr> </table>	0.00																			
0.00																					
TOTAL This Period (last page this line number only)	<table border="1"> <tr> <td colspan="10"></td> </tr> </table>																				

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 62 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) HyVee	Transaction ID: BBF9BC05D38C9463B8F6 Date of Disbursement																				
Mailing Address 170 E. Washington	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	1		2	0	0	7												
City Mt. Pleasant State IA Zip Code 52641	Amount of Each Disbursement this Period																				
Purpose of Disbursement Food & Beverage	<table border="1"> <tr> <td colspan="10">61.17</td> </tr> </table>	61.17																			
61.17																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
[MEMO ITEM]																					
B. Full Name (Last, First, Middle Initial) HyVee	Transaction ID: B66DC967CFD814134817 Date of Disbursement																				
Mailing Address 170 E. Washington	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Mt. Pleasant State IA Zip Code 52641	Amount of Each Disbursement this Period																				
Purpose of Disbursement Food & Beverage	<table border="1"> <tr> <td colspan="10">41.52</td> </tr> </table>	41.52																			
41.52																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
[MEMO ITEM]																					
C. Full Name (Last, First, Middle Initial) HyVee	Transaction ID: BCC11F4B77D744C99988 Date of Disbursement																				
Mailing Address 170 E. Washington	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Mt. Pleasant State IA Zip Code 52641	Amount of Each Disbursement this Period																				
Purpose of Disbursement Food & Beverage	<table border="1"> <tr> <td colspan="10">59.68</td> </tr> </table>	59.68																			
59.68																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
[MEMO ITEM]																					

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 63 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

HyVee

Mailing Address 170 E. Washington

City State Zip Code
Mt. Pleasant IA 52641

Purpose of Disbursement

Food & Beverage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: BB0A380404CA142CCBFB

Date of Disbursement

MM / DD / YYYY
01 / 02 / 2008

Amount of Each Disbursement this Period

66.69

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

International Association of Fire Fighters

Mailing Address 1750 New York Avenue, NW

City State Zip Code
Washington DC 20006

Purpose of Disbursement

Travel Expenses

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: BD9ED6E8F17534731A81

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2008

Amount of Each Disbursement this Period

2903.95

C.

Full Name (Last, First, Middle Initial)

IRS

Mailing Address P.O. Box 8530

City State Zip Code
Philadelphia PA 19162

Purpose of Disbursement

Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B8B38B1B3A2EF4C69928

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2008

Amount of Each Disbursement this Period

9085.02

SUBTOTAL of Disbursements This Page (optional)

11988.97

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 64 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

IRS

Mailing Address P.O. Box 8530

City
Philadelphia

State
PA

Zip Code
19162

Purpose of Disbursement
Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B1C1FD5C48C57406C982

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3349.52

B.

Full Name (Last, First, Middle Initial)

Kum & Go

Mailing Address

City
Ottumwa

State
IA

Zip Code

Purpose of Disbursement
Food & Beverage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B6673D5CC879C4D90B10

Date of Disbursement

/ /

Amount of Each Disbursement this Period

79.11

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Kum & Go

Mailing Address

City
Ottumwa

State
IA

Zip Code

Purpose of Disbursement
Food & Beverage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B0EC9B02D235B459A8E8

Date of Disbursement

/ /

Amount of Each Disbursement this Period

83.47

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

3349.52

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3P)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 65 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

La Quinta Inn & Suites

Mailing Address 909 Hidden Ridge, Suite 600

City State Zip Code
Irving TX 75038Purpose of Disbursement
Lodging

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B0727E35EE78C4AC7ACA

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 2 8 / 2 0 0 7

Amount of Each Disbursement this Period

88.48

[MEMO ITEM]**B.**

Full Name (Last, First, Middle Initial)

La Quinta Inn & Suites

Mailing Address 909 Hidden Ridge, Suite 600

City State Zip Code
Irving TX 75038Purpose of Disbursement
Lodging

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B95F8EFF7C4C241E3A0E

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 2 8 / 2 0 0 7

Amount of Each Disbursement this Period

187.55

[MEMO ITEM]**C.**

Full Name (Last, First, Middle Initial)

La Quinta Inn & Suites

Mailing Address 909 Hidden Ridge, Suite 600

City State Zip Code
Irving TX 75038Purpose of Disbursement
Lodging

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B9A0D1D5459EA4607B87

Date of Disbursement

M M / D D / Y Y Y Y
0 1 / 0 4 / 2 0 0 8

Amount of Each Disbursement this Period

99.68

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 66 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) La Quinta Inn & Suites</p> <p>Mailing Address 909 Hidden Ridge, Suite 600</p> <p>City Irving State TX Zip Code 75038</p> <p>Purpose of Disbursement Lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B5641E024373241E9A72</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 498.40</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Las Vegas Copiers, Inc.</p> <p>Mailing Address 4200 W Desert Inn Road #F</p> <p>City Las Vegas State NV Zip Code 89102</p> <p>Purpose of Disbursement Copier</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B56C1DD11BD194035AE7</p> <p>Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 7 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period 406.20</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Lexis Nexis</p> <p>Mailing Address P.O. Box 933</p> <p>City Dayton State OH Zip Code 45401</p> <p>Purpose of Disbursement Research Software</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B943D59E96FD54BFF817</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 951.75</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 67 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) MD Dept Taxation</p> <p>Mailing Address 301 W. Preston Street</p> <p>City Baltimore State MD Zip Code 21201</p> <p>Purpose of Disbursement Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BD691B1E9B12246B1AE2</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="198.71"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mexico Antiguo</p> <p>Mailing Address 25 W Main St</p> <p>City Marshalltown State IA Zip Code</p> <p>Purpose of Disbursement Food & Beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B416403B928354D4C930</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="282.80"/></p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Michelle Mundell Makeup</p> <p>Mailing Address 3022 Ferndale Street</p> <p>City Kensington State MD Zip Code 20895-2751</p> <p>Purpose of Disbursement Make-up Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BC472D38CEAC54E5AA97</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="325.00"/></p>

SUBTOTAL of Disbursements This Page (optional)

523.71

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 68 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Northwest Airlines	Transaction ID: BD01686E9870D443A9F2 Date of Disbursement																				
Mailing Address 7500 Airline Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	6		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	6		2	0	7													
City Minneapolis State MN Zip Code 55450-1101	Amount of Each Disbursement this Period <table border="1"> <tr> <td>10.00</td> </tr> </table>	10.00																			
10.00																					
Purpose of Disbursement Airfare	<input type="text"/>																				
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
[MEMO ITEM]																					
B. Full Name (Last, First, Middle Initial) Northwest Airlines	Transaction ID: B3236016786704E268E2 Date of Disbursement																				
Mailing Address 7500 Airline Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	6		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	6		2	0	7													
City Minneapolis State MN Zip Code 55450-1101	Amount of Each Disbursement this Period <table border="1"> <tr> <td>364.61</td> </tr> </table>	364.61																			
364.61																					
Purpose of Disbursement Airfare	<input type="text"/>																				
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
[MEMO ITEM]																					
C. Full Name (Last, First, Middle Initial) Northwest Airlines	Transaction ID: B789F8FBBBF4646B4834 Date of Disbursement																				
Mailing Address 7500 Airline Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	8		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	8		2	0	7													
City Minneapolis State MN Zip Code 55450-1101	Amount of Each Disbursement this Period <table border="1"> <tr> <td>562.59</td> </tr> </table>	562.59																			
562.59																					
Purpose of Disbursement Airfare	<input type="text"/>																				
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
[MEMO ITEM]																					
SUBTOTAL of Disbursements This Page (optional)	<table border="1"> <tr> <td>0.00</td> </tr> </table>	0.00																			
0.00																					
TOTAL This Period (last page this line number only)	<table border="1"> <tr> <td></td> </tr> </table>																				

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 69 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Northwest Airlines

Mailing Address 7500 Airline Drive

City State Zip Code
Minneapolis MN 55450-1101

Purpose of Disbursement

Airfare

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: B9C9B8D53B20C40D3895

Date of Disbursement

/ /

Amount of Each Disbursement this Period

10.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Panera Bread

Mailing Address 250 S. Wacker

City State Zip Code
Chicago IL 60606-6301

Purpose of Disbursement

Food & Beverage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: B1C56402929724621904

Date of Disbursement

/ /

Amount of Each Disbursement this Period

40.68

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Penske Truck Rental

Mailing Address 4101 E. 14th Street

City State Zip Code
Des Moines IA 50313

Purpose of Disbursement

Transportation

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: BCF4A62DC1FFC4CA3A56

Date of Disbursement

/ /

Amount of Each Disbursement this Period

900.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 70 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)
Penske Truck Rental

Mailing Address 4101 E. 14th Street

City State Zip Code
Des Moines IA 50313

Purpose of Disbursement
Transportation

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: BF59D39CE403242E6978

Date of Disbursement

/ /

Amount of Each Disbursement this Period

132.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Petty Cash

Mailing Address P.O. Box 270701

City State Zip Code
West Hartford CT 06127

Purpose of Disbursement
Reimbursement for parking, taxis, small

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: BF90E5D79D8A24DFFBF4

Date of Disbursement

/ /

Amount of Each Disbursement this Period

300.00

C.

Full Name (Last, First, Middle Initial)
Pitney Bowes

Mailing Address PO Box 856390

City State Zip Code
Louisville KY 40285

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B04DACBB57E664E42879

Date of Disbursement

/ /

Amount of Each Disbursement this Period

75.50

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 71 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) QT</p> <p>Mailing Address</p> <p>City Des Moines State IA Zip Code</p> <p>Purpose of Disbursement Gas</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B50D430CB92014F6BB29</p> <p>Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 6 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period 43.97</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) QT</p> <p>Mailing Address</p> <p>City Des Moines State IA Zip Code</p> <p>Purpose of Disbursement Gas</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B47319F3F693C4CC2A69</p> <p>Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 6 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period 3.83</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) QT</p> <p>Mailing Address</p> <p>City Des Moines State IA Zip Code</p> <p>Purpose of Disbursement Gas</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B8FE5582E5ECF442A9D4</p> <p>Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 8 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period 51.92</p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) ► 0.00</p>	
<p>TOTAL This Period (last page this line number only) ►</p>	

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 72 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)
QT

Mailing Address

City State Zip Code
Des Moines IA

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B9FD4F2CBE29A4B2D866

Date of Disbursement

/ /

Amount of Each Disbursement this Period

11.60

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
QT

Mailing Address

City State Zip Code
Des Moines IA

Purpose of Disbursement
Gas

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B777C28E20F4D4FA9A09

Date of Disbursement

/ /

Amount of Each Disbursement this Period

52.62

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Radio Shack

Mailing Address Riverfront Campus World Headquarte
300 RadioShack Circle

City State Zip Code
Forth Worth TX 76102

Purpose of Disbursement
Electronics

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B3B104C70207449618AA

Date of Disbursement

/ /

Amount of Each Disbursement this Period

42.39

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 73 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Radisson Mailing Address 220 India Street	Transaction ID: BAE8DD2FB901647EFB3D Date of Disbursement <div> <div>12</div> <div>27</div> <div>2007</div> </div>
City Providence State RI Zip Code 02903-4314 Purpose of Disbursement Lodging Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>100.00</div> [MEMO ITEM]
B. Full Name (Last, First, Middle Initial) Residence Inn by Marriott Mailing Address 10400 Fernwood Road City Bethesda State MD Zip Code 20817 Purpose of Disbursement Lodging Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B475C9B21DB5F46E0AAB Date of Disbursement <div> <div>12</div> <div>28</div> <div>2007</div> </div> Amount of Each Disbursement this Period <div>298.56</div> [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) Residence Inn by Marriott Mailing Address 10400 Fernwood Road City Bethesda State MD Zip Code 20817 Purpose of Disbursement Lodging Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BB4DEAA14DE17432CA6E Date of Disbursement <div> <div>12</div> <div>29</div> <div>2007</div> </div> Amount of Each Disbursement this Period <div>445.44</div> [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 74 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Richard Daley Studio

Mailing Address 140 Huyshope Avenue

City Hartford State CT Zip Code 06106

Purpose of Disbursement
Photographer

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: BD86851CDACB34592887

Date of Disbursement

02 / 20 / 2008

Amount of Each Disbursement this Period

225.00

B.

Full Name (Last, First, Middle Initial)

Ryan Business Systems

Mailing Address 455 Governor's Hwy

City South Windsor State CT Zip Code 06074

Purpose of Disbursement
Copier

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B34F73E1DC2614AE1ABD

Date of Disbursement

02 / 01 / 2008

Amount of Each Disbursement this Period

349.80

C.

Full Name (Last, First, Middle Initial)

Southwest Airlines

Mailing Address P.O. Box 36657

City Dallas State TX Zip Code 75235

Purpose of Disbursement
Airfare

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B00E8D06C3B1F437DBB6

Date of Disbursement

12 / 27 / 2007

Amount of Each Disbursement this Period

128.40

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

574.80

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 75 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: BD767FEC36C02412DB6F Date of Disbursement
Mailing Address P.O. Box 36657	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 2 7 / 2 0 0 7</div> </div>
City Dallas State TX Zip Code 75235	Amount of Each Disbursement this Period
Purpose of Disbursement Airfare	<div>128.40</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
[MEMO ITEM]	
B. Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: B272781FB153D429B891 Date of Disbursement
Mailing Address P.O. Box 36657	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 7 / 2 0 0 8</div> </div>
City Dallas State TX Zip Code 75235	Amount of Each Disbursement this Period
Purpose of Disbursement Airfare	<div>128.50</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
[MEMO ITEM]	
C. Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: BF387AEC360DB456582E Date of Disbursement
Mailing Address P.O. Box 36657	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 7 / 2 0 0 8</div> </div>
City Dallas State TX Zip Code 75235	Amount of Each Disbursement this Period
Purpose of Disbursement Airfare	<div>257.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
[MEMO ITEM]	

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 76 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: B76C2CC6DA7BF4D24A56 Date of Disbursement																				
Mailing Address P.O. Box 36657	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	9		2	0	0	8												
City Dallas State TX Zip Code 75235	Amount of Each Disbursement this Period																				
Purpose of Disbursement Airfare	<table border="1"> <tr> <td colspan="10">25.00</td> </tr> </table>	25.00																			
25.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: B00B92DF6A06F4486959 Date of Disbursement																				
Mailing Address P.O. Box 36657	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	6		2	0	0	8												
City Dallas State TX Zip Code 75235	Amount of Each Disbursement this Period																				
Purpose of Disbursement Airfare	<table border="1"> <tr> <td colspan="10">128.50</td> </tr> </table>	128.50																			
128.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Staples	Transaction ID: BC297417ED45646179D9 Date of Disbursement																				
Mailing Address 3307 M Street NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	7		2	0	0	7												
City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period																				
Purpose of Disbursement Office Supplies	<table border="1"> <tr> <td colspan="10">196.62</td> </tr> </table>	196.62																			
196.62																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 77 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 3307 M Street NW</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B4889C6E87B904A48AA7</p> <p>Date of Disbursement 12 / 27 / 2007</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 3307 M Street NW</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B369A0A86CDA5405285D</p> <p>Date of Disbursement 12 / 28 / 2007</p> <p>Amount of Each Disbursement this Period 74.09</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 3307 M Street NW</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B7080B8791E9B4D89BB1</p> <p>Date of Disbursement 12 / 28 / 2007</p> <p>Amount of Each Disbursement this Period 213.47</p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) ► 0.00</p>	
<p>TOTAL This Period (last page this line number only) ►</p>	

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 78 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Staples	Transaction ID: B5F9DA4BF974F45CDACF Date of Disbursement																				
Mailing Address 3307 M Street NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	0		2	0	0	8												
City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period																				
Purpose of Disbursement Office Supplies Candidate Name	<table border="1"> <tr> <td colspan="10">16.91</td> </tr> </table>	16.91																			
16.91																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type	[MEMO ITEM]																				
B. Full Name (Last, First, Middle Initial) Staples	Transaction ID: B33D7A34CA0704C649F5 Date of Disbursement																				
Mailing Address 3307 M Street NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	0		2	0	0	8												
City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period																				
Purpose of Disbursement Office Supplies Candidate Name	<table border="1"> <tr> <td colspan="10">24.30</td> </tr> </table>	24.30																			
24.30																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type	[MEMO ITEM]																				
C. Full Name (Last, First, Middle Initial) Super 8 Motel	Transaction ID: B2437FB1F3AF642A48C3 Date of Disbursement																				
Mailing Address	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	7		2	0	0	7												
City Carroll State IA Zip Code	Amount of Each Disbursement this Period																				
Purpose of Disbursement Lodging Candidate Name	<table border="1"> <tr> <td colspan="10">56.00</td> </tr> </table>	56.00																			
56.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type	[MEMO ITEM]																				
SUBTOTAL of Disbursements This Page (optional)	<table border="1"> <tr> <td colspan="10">0.00</td> </tr> </table>	0.00																			
0.00																					
TOTAL This Period (last page this line number only)	<table border="1"> <tr> <td colspan="10"></td> </tr> </table>																				

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 79 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Target	Transaction ID: B5793AADC5FDD4618A63 Date of Disbursement
Mailing Address 3101 Jefferson Davis Hwy	<div> <div>12</div> <div>28</div> <div>2007</div> </div>
City Alexandria State VA Zip Code 22305	Amount of Each Disbursement this Period
Purpose of Disbursement Office Supplies Candidate Name	<div>128.38</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General State: District: <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
B. Full Name (Last, First, Middle Initial) Target	Transaction ID: B88B3FF9AC8E947AC9DC Date of Disbursement
Mailing Address 3101 Jefferson Davis Hwy	<div> <div>12</div> <div>28</div> <div>2007</div> </div>
City Alexandria State VA Zip Code 22305	Amount of Each Disbursement this Period
Purpose of Disbursement Office Supplies Candidate Name	<div>21.53</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General State: District: <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
C. Full Name (Last, First, Middle Initial) Target	Transaction ID: BC652DD68C565473EBCA Date of Disbursement
Mailing Address 3101 Jefferson Davis Hwy	<div> <div>12</div> <div>28</div> <div>2007</div> </div>
City Alexandria State VA Zip Code 22305	Amount of Each Disbursement this Period
Purpose of Disbursement Office Supplies Candidate Name	<div>10.58</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General State: District: <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
SUBTOTAL of Disbursements This Page (optional) ▶	<div>0.00</div>
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 80 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) The Blue Strawberry</p> <p>Mailing Address</p> <p>City Cedar Rapids State IA Zip Code</p> <p>Purpose of Disbursement General Merchandise</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B50494C2F0BB4473A9A4</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 1 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 230.00</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) The Gelston House</p> <p>Mailing Address 8 Main Street</p> <p>City East Haddam State CT Zip Code</p> <p>Purpose of Disbursement Food & Beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BD401A8C983CE43BCA66</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 7504.80</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) The Hampton Inn</p> <p>Mailing Address 1020 S Frederick Ave</p> <p>City Dodge State IA Zip Code</p> <p>Purpose of Disbursement Hotel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B84C8D072709340959B0</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 1 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 133.28</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 81 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

The Hampton Inn

Mailing Address 1020 S Frederick Ave

City
Dodge

State
IA

Zip Code

Purpose of Disbursement
Hotel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B5874B53D9D12471FB84

Date of Disbursement

/ /

Amount of Each Disbursement this Period

150.39

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

The Other Place

Mailing Address 2214 College Street

City
Cedar Falls

State
IA

Zip Code

Purpose of Disbursement
Food & Beverage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B8396FDF6A2A04E8A92E

Date of Disbursement

/ /

Amount of Each Disbursement this Period

211.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

TiVo Inc.

Mailing Address 2160 Gold Street
P.O. Box 2160

City
Alviso

State
CA

Zip Code
95002-2160

Purpose of Disbursement
Cable Service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B6AEABFDED02E4BDFADE

Date of Disbursement

/ /

Amount of Each Disbursement this Period

12.95

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

PAGE 82 / 159

X	23		24		25		26		27a
	27b		28a		28b		28c		29

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) TiVo Inc. <hr/> Mailing Address 2160 Gold Street P.O. Box 2160 <hr/> <div style="display: flex; justify-content: space-between;"> City Alviso State CA Zip Code 95002-2160 </div> <hr/> <div style="display: flex;"> <div style="flex: 1;"> Purpose of Disbursement Cable Service <hr/> Candidate Name </div> <div style="flex: 0.5; align-self: center; border: 1px solid black; padding: 2px;"> Category/ Type </div> </div> <hr/> <div style="display: flex;"> <div style="flex: 1;"> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: </div> <div style="flex: 1;"> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </div> </div>	Transaction ID: BDCE5A863A1F6426CA88 Date of Disbursement <div style="display: flex; justify-content: space-around;"> <div>M M / D D / Y Y Y Y 0 1 / 2 2 / 2 0 0 8</div> </div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid gray; padding: 5px; text-align: right;">12.95</div> [MEMO ITEM]
B. Full Name (Last, First, Middle Initial) TiVo Inc. <hr/> Mailing Address 2160 Gold Street P.O. Box 2160 <hr/> <div style="display: flex; justify-content: space-between;"> City Alviso State CA Zip Code 95002-2160 </div> <hr/> <div style="display: flex;"> <div style="flex: 1;"> Purpose of Disbursement Cable Service <hr/> Candidate Name </div> <div style="flex: 0.5; align-self: center; border: 1px solid black; padding: 2px;"> Category/ Type </div> </div> <hr/> <div style="display: flex;"> <div style="flex: 1;"> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: </div> <div style="flex: 1;"> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </div> </div>	Transaction ID: BAC9329A4CBB9402CB13 Date of Disbursement <div style="display: flex; justify-content: space-around;"> <div>M M / D D / Y Y Y Y 0 1 / 2 4 / 2 0 0 8</div> </div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid gray; padding: 5px; text-align: right;">33.90</div> [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) Tracfone Wireless <hr/> Mailing Address 9700 NW 112th Avenue <hr/> <div style="display: flex; justify-content: space-between;"> City Miami State FL Zip Code 33178 </div> <hr/> <div style="display: flex;"> <div style="flex: 1;"> Purpose of Disbursement Telephone <hr/> Candidate Name </div> <div style="flex: 0.5; align-self: center; border: 1px solid black; padding: 2px;"> Category/ Type </div> </div> <hr/> <div style="display: flex;"> <div style="flex: 1;"> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: </div> <div style="flex: 1;"> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </div> </div>	Transaction ID: B2928F47A585E4084AEC Date of Disbursement <div style="display: flex; justify-content: space-around;"> <div>M M / D D / Y Y Y Y 0 1 / 0 3 / 2 0 0 8</div> </div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid gray; padding: 5px; text-align: right;">21.38</div> [MEMO ITEM]
SUBTOTAL of Disbursements This Page (optional) ▶	
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 83 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)
Tracfone Wireless

Mailing Address 9700 NW 112th Avenue

City State Zip Code
Miami FL 33178

Purpose of Disbursement
Telephone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B298FAB92C1994B0C9D9

Date of Disbursement

/ /

Amount of Each Disbursement this Period

21.38

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
U. S. Postal Service

Mailing Address 800 K Street

City State Zip Code
Washington DC 20001

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: BE83172D3C5EC4E7A858

Date of Disbursement

/ /

Amount of Each Disbursement this Period

369.00

C.

Full Name (Last, First, Middle Initial)
United Airlines

Mailing Address P.O. Box6057

City State Zip Code
Dearborn MI 48121

Purpose of Disbursement
Airfare

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B82080E21D090432D995

Date of Disbursement

/ /

Amount of Each Disbursement this Period

565.60

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

369.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 84 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) United Airlines</p> <p>Mailing Address P.O. Box6057</p> <p>City Dearborn State MI Zip Code 48121</p> <p>Purpose of Disbursement Airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BEF572C87FDE14A50833</p> <p>Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 7 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period 774.45</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) UPS</p> <p>Mailing Address PO Box 7247-0244</p> <p>City Philadelphia State PA Zip Code 19170</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B1E4274C73EAE4635996</p> <p>Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 0 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period 158.99</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) UPS</p> <p>Mailing Address PO Box 7247-0244</p> <p>City Philadelphia State PA Zip Code 19170</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B2EEC33EB5965474598B</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 7 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 57.58</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 85 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) UPS	Transaction ID: BE12E66BACC344850B83 Date of Disbursement																				
Mailing Address PO Box 7247-0244	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	3		2	0	0	8												
City Philadelphia State PA Zip Code 19170 Purpose of Disbursement Shipping Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">384.59</td> </tr> </table>	384.59																			
384.59																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]																				
B. Full Name (Last, First, Middle Initial) UPS	Transaction ID: B900CEA99A57942F4BE4 Date of Disbursement																				
Mailing Address PO Box 7247-0244	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	0		2	0	0	8												
City Philadelphia State PA Zip Code 19170 Purpose of Disbursement Shipping Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">1641.46</td> </tr> </table>	1641.46																			
1641.46																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]																				
C. Full Name (Last, First, Middle Initial) USRental.com	Transaction ID: BC64CBBC9046A405D905 Date of Disbursement																				
Mailing Address 970 Summer Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	4		2	0	0	8												
City Stamford State CT Zip Code 06905-5542 Purpose of Disbursement Computer Rental Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">297.00</td> </tr> </table>	297.00																			
297.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]																				
SUBTOTAL of Disbursements This Page (optional)	<table border="1"> <tr> <td colspan="10">0.00</td> </tr> </table>	0.00																			
0.00																					
TOTAL This Period (last page this line number only)	<table border="1"> <tr> <td colspan="10"></td> </tr> </table>																				

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 86 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)
USRental.com

Mailing Address 970 Summer Street

City State Zip Code
Stamford CT 06905-5542

Purpose of Disbursement
Computer Rental

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B31F94A0BB51F4646875

Date of Disbursement

MM / DD / YYYY
01 / 04 / 2008

Amount of Each Disbursement this Period

396.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
USRental.com

Mailing Address 970 Summer Street

City State Zip Code
Stamford CT 06905-5542

Purpose of Disbursement
Computer Equipment

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: BF8B21249220C4C768A5

Date of Disbursement

MM / DD / YYYY
01 / 04 / 2008

Amount of Each Disbursement this Period

1980.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
USRental.com

Mailing Address 970 Summer Street

City State Zip Code
Stamford CT 06905-5542

Purpose of Disbursement
Computer Rental

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B66D73B5DCB944AC7B0B

Date of Disbursement

MM / DD / YYYY
01 / 04 / 2008

Amount of Each Disbursement this Period

99.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 87 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) USRental.com	Transaction ID: B57BD1B260F2B49B5A74 Date of Disbursement																				
Mailing Address 970 Summer Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City Stamford State CT Zip Code 06905-5542	Amount of Each Disbursement this Period																				
Purpose of Disbursement Computer Rental	<table border="1"> <tr> <td colspan="10">138.00</td> </tr> </table>	138.00																			
138.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
[MEMO ITEM]																					
B. Full Name (Last, First, Middle Initial) USRental.com	Transaction ID: BBF1C111F3C5B4401B88 Date of Disbursement																				
Mailing Address 970 Summer Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City Stamford State CT Zip Code 06905-5542	Amount of Each Disbursement this Period																				
Purpose of Disbursement Computer Rental	<table border="1"> <tr> <td colspan="10">99.00</td> </tr> </table>	99.00																			
99.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
[MEMO ITEM]																					
C. Full Name (Last, First, Middle Initial) UTC	Transaction ID: B02ADAD9443FC407C974 Date of Disbursement																				
Mailing Address 1401 Eye Street, NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	1		2	0	0	8												
City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period																				
Purpose of Disbursement Airfare	<table border="1"> <tr> <td colspan="10">37508.26</td> </tr> </table>	37508.26																			
37508.26																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

37508.26

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 88 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

<p>A. Full Name (Last, First, Middle Initial) VA Dept Taxation</p> <p>Mailing Address Payroll Tax Dept. 2220 West Broad St.</p> <p>City Arlington State VA Zip Code 22204</p> <p>Purpose of Disbursement Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B4318B463A5A94E2A857</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 367.13</p>
<p>B. Full Name (Last, First, Middle Initial) Verizon</p> <p>Mailing Address P.O. Box 15041</p> <p>City Worcester State MA Zip Code 01615-0023</p> <p>Purpose of Disbursement Equipment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B4022D76388894FBABE8</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 7 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 23.84</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Mr. Jacob Breymaier</p> <p>Mailing Address 4061 Grandview Court</p> <p>City Toledo State OH Zip Code 43614-3340</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BF15468F169B64CFA949</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 463.00</p>

SUBTOTAL of Disbursements This Page (optional)

830.13

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 89 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Ms. Sheryl Cohen	Transaction ID: BA18B24DE60EC4DB999B Date of Disbursement																				
Mailing Address 2241 North Vermont Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	1		2	0	0	8												
City State Zip Code Arlington VA 22207-4032	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">4655.95</td> </tr> </table>	4655.95																			
4655.95																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type																				
B. Full Name (Last, First, Middle Initial) Kathryn Damato	Transaction ID: BA8434678DD284BB7B96 Date of Disbursement																				
Mailing Address 10 Blackhawk Lane	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	1		2	0	0	8												
City State Zip Code West Hartford CT 06117	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">3668.12</td> </tr> </table>	3668.12																			
3668.12																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type																				
C. Full Name (Last, First, Middle Initial) Kathryn Damato	Transaction ID: B617E8DC23E874729826 Date of Disbursement																				
Mailing Address 10 Blackhawk Lane	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	5		2	0	0	8												
City State Zip Code West Hartford CT 06117	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">2009.86</td> </tr> </table>	2009.86																			
2009.86																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type																				

SUBTOTAL of Disbursements This Page (optional)

10333.93

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 90 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Patrick & Judi Duggan	Transaction ID: BFE62BE3F47944A40B13 Date of Disbursement																				
Mailing Address 2005 Simpson Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	9		2	0	0	8												
City Dubuque State IA Zip Code 52003-7713	Amount of Each Disbursement this Period																				
Purpose of Disbursement Rent & Utilities Candidate Name	<table border="1"> <tr> <td colspan="10">692.00</td> </tr> </table>	692.00																			
692.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Emily Fetting	Transaction ID: B6F579A6E73E74D4DA1A Date of Disbursement																				
Mailing Address 513 Independence Avenue SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	1		2	0	0	8												
City Washington State DC Zip Code 20003-1144	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">991.49</td> </tr> </table>	991.49																			
991.49																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Emily Fetting	Transaction ID: BB34217EEA1FC4A019EA Date of Disbursement																				
Mailing Address 513 Independence Avenue SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	5		2	0	0	8												
City Washington State DC Zip Code 20003-1144	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">991.50</td> </tr> </table>	991.50																			
991.50																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

2674.99

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 91 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Ms. Katie Finn	Transaction ID: B57CBCA0B91D545539A3 Date of Disbursement
Mailing Address 2864 Coral Court, Apt#104	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 8</div> </div>
City State Zip Code Coralville IA 52241-2823	Amount of Each Disbursement this Period
Purpose of Disbursement Expenses	<div> <div></div> <div>605.12</div> </div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Mr. Vincent Frillici	Transaction ID: B6AE1919729344351A1F Date of Disbursement
Mailing Address 1100 H St., Ste.940 NW	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 1 / 2 0 0 8</div> </div>
City State Zip Code Washington DC 20005-5476	Amount of Each Disbursement this Period
Purpose of Disbursement Salary	<div> <div></div> <div>1824.40</div> </div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Mr. Vincent Frillici	Transaction ID: B0BBA171B411349C4AE8 Date of Disbursement
Mailing Address 1100 H St., Ste.940 NW	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 8</div> </div>
City State Zip Code Washington DC 20005-5476	Amount of Each Disbursement this Period
Purpose of Disbursement Salary	<div> <div></div> <div>1239.13</div> </div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

3668.65

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 92 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Mr. Vincent E. Fusco	Transaction ID: B58A807A594014994876 Date of Disbursement																				
Mailing Address 3521 39th St. NW Suite E-497	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	1		2	0	0	8												
City Washington State DC Zip Code 20016-3069	Amount of Each Disbursement this Period																				
Purpose of Disbursement Travel & Office Expenses Candidate Name	<table border="1"> <tr> <td colspan="10">598.94</td> </tr> </table>	598.94																			
598.94																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Mr. Vincent E. Fusco	Transaction ID: B35D1DE9D33D24165908 Date of Disbursement																				
Mailing Address 3521 39th St. NW Suite E-497	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	1		2	0	0	8												
City Washington State DC Zip Code 20016-3069	Amount of Each Disbursement this Period																				
Purpose of Disbursement Tech/Computer Consulting Candidate Name	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Mr. Vincent E. Fusco	Transaction ID: BE35D268313B94DF488A Date of Disbursement																				
Mailing Address 3521 39th St. NW Suite E-497	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	1		2	0	0	8												
City Washington State DC Zip Code 20016-3069	Amount of Each Disbursement this Period																				
Purpose of Disbursement Tech/Computer Consulting Candidate Name	<table border="1"> <tr> <td colspan="10">10000.00</td> </tr> </table>	10000.00																			
10000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

15598.94

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 93 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Ms. Euginia Gluzberg	Transaction ID: B8D5077D0EF0D419B888 Date of Disbursement																				
Mailing Address 1380 Paradise Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	1		2	0	0	8												
City Hamden State CT Zip Code 06514-1017	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">1160.24</td> </tr> </table>	1160.24																			
1160.24																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Ms. Euginia Gluzberg	Transaction ID: BB4A4E95F4C75488E90F Date of Disbursement																				
Mailing Address 1380 Paradise Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	5		2	0	0	8												
City Hamden State CT Zip Code 06514-1017	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">1160.24</td> </tr> </table>	1160.24																			
1160.24																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Debra Greenspan	Transaction ID: BA208E9D446ED4225B08 Date of Disbursement																				
Mailing Address 1703 East West Highway #511	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	1		2	0	0	8												
City Silver Spring State MD Zip Code 20910-3031	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">1418.90</td> </tr> </table>	1418.90																			
1418.90																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

3739.38

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 94 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Debra Greenspan	Transaction ID: B0CDBCBB0C82345B683C Date of Disbursement																				
Mailing Address 1703 East West Highway #511	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	5		2	0	0	8												
City State Zip Code Silver Spring MD 20910-3031 Purpose of Disbursement Salary Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>768.88</td> </tr> </table>	768.88																			
768.88																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
B. Full Name (Last, First, Middle Initial) Este Griffith	Transaction ID: BD81491A33E02432ABDA Date of Disbursement																				
Mailing Address 503 E. 35th Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	1		2	0	0	8												
City State Zip Code Baltimore MD 21218-2550 Purpose of Disbursement Salary Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>1000.37</td> </tr> </table>	1000.37																			
1000.37																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
C. Full Name (Last, First, Middle Initial) Kristina Mueller	Transaction ID: BF718CB29671B4440A70 Date of Disbursement																				
Mailing Address 379 Elm Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	5		2	0	0	8												
City State Zip Code Manchester NH 03101 Purpose of Disbursement Salary Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>938.84</td> </tr> </table>	938.84																			
938.84																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				

SUBTOTAL of Disbursements This Page (optional)

2708.09

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 95 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Karen Polet	Transaction ID: B39109284A57243F8946 Date of Disbursement																				
Mailing Address 1725 Winding Hills Drive #305	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	1		2	0	0	8												
City Davenport State IA Zip Code 52806	Amount of Each Disbursement this Period																				
Purpose of Disbursement Travel & Office Supplies	<table border="1"> <tr> <td colspan="10">341.00</td> </tr> </table>	341.00																			
341.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Kelly Jean Ronan	Transaction ID: B939B0F2FA62E43F698D Date of Disbursement																				
Mailing Address 8811 Colesville Road, #424	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	1		2	0	0	8												
City Silver Spring State MD Zip Code 20910-4332	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">967.49</td> </tr> </table>	967.49																			
967.49																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Ms. Melissa Scully	Transaction ID: B8E2F42A1D4C44E2EB5D Date of Disbursement																				
Mailing Address 4 Pine Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	1		2	0	0	8												
City Unionville State CT Zip Code 06085-1520	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">967.49</td> </tr> </table>	967.49																			
967.49																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

2275.98

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 96 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Ms. Melissa Scully	Transaction ID: B3C3775E0CB1B477C831 Date of Disbursement																				
Mailing Address 4 Pine Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	5		2	0	0	8												
City Unionville State CT Zip Code 06085-1520	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">967.50</td> </tr> </table>	967.50																			
967.50																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Chuck Swirsky	Transaction ID: BCF7084165A724B0CB8C Date of Disbursement																				
Mailing Address 229 Wooster Street, Apt 229	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	1		2	0	0	8												
City New Haven State CT Zip Code 06511-5711	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Cedric Williams	Transaction ID: B53075ED63BB64A22849 Date of Disbursement																				
Mailing Address 4401 Aldrich Avenue S	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	9		2	0	0	8												
City Minneapolis State MN Zip Code 55419-4821	Amount of Each Disbursement this Period																				
Purpose of Disbursement Car repairs Candidate Name	<table border="1"> <tr> <td colspan="10">2500.00</td> </tr> </table>	2500.00																			
2500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

3967.50

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 97 / 159

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)
Philip Yoo

Mailing Address 603 Irving Street, NW

City Washington State DC Zip Code 20010-2905

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: B901C104F45A842D3BFC

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1334.11

B.

Full Name (Last, First, Middle Initial)
Philip Yoo

Mailing Address 603 Irving Street, NW

City Washington State DC Zip Code 20010-2905

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: B2B2DBC6B0162436C817

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1334.10

SUBTOTAL of Disbursements This Page (optional)

2668.21

TOTAL This Period (last page this line number only)

176740.80

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 98 / 159

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input checked="" type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Webster Bank	Transaction ID: B40E033321B5047A0992 Date of Disbursement																				
Mailing Address 185 Asylum Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	2		2	0	0	8												
City Hartford State CT Zip Code 06103-3401	Amount of Each Disbursement this Period																				
Purpose of Disbursement Loan Repayment Candidate Name	<table border="1"> <tr> <td colspan="10">158711.84</td> </tr> </table>	158711.84																			
158711.84																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Webster Bank	Transaction ID: B874CAE1D94B441B89B0 Date of Disbursement																				
Mailing Address 185 Asylum Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	8		2	0	0	8												
City Hartford State CT Zip Code 06103-3401	Amount of Each Disbursement this Period																				
Purpose of Disbursement Loan Repayment Candidate Name	<table border="1"> <tr> <td colspan="10">176465.47</td> </tr> </table>	176465.47																			
176465.47																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Webster Bank	Transaction ID: BD731D76683B7435A821 Date of Disbursement																				
Mailing Address 185 Asylum Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	5		2	0	0	8												
City Hartford State CT Zip Code 06103-3401	Amount of Each Disbursement this Period																				
Purpose of Disbursement Loan Repayment Candidate Name	<table border="1"> <tr> <td colspan="10">166779.15</td> </tr> </table>	166779.15																			
166779.15																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

501956.46

TOTAL This Period (last page this line number only)

501956.46

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 99 / 159

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Bradley Asness	Transaction ID: B410F20B63A1B4386995 Date of Disbursement																				
Mailing Address 22 Dewart Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	4		2	0	0	8												
City Greenwich State CT Zip Code 06830	Amount of Each Disbursement this Period																				
Purpose of Disbursement Refund	<table border="1"> <tr> <td>2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Mrs. Carol Asness	Transaction ID: B7B48C9DD4D2F43038AB Date of Disbursement																				
Mailing Address 22 Dewart	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	4		2	0	0	8												
City Greenwich State CT Zip Code 06830	Amount of Each Disbursement this Period																				
Purpose of Disbursement Refund	<table border="1"> <tr> <td>2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Cliff Asness	Transaction ID: BA76AC59394404586A8E Date of Disbursement																				
Mailing Address 516 North St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	4		2	0	0	8												
City Greenwich State CT Zip Code 06830	Amount of Each Disbursement this Period																				
Purpose of Disbursement Refund	<table border="1"> <tr> <td>2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

6900.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 100 / 159

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)
Mrs. Laurel Asnes

Mailing Address 516 North Street

City State Zip Code
Greenwich CT 06830

Purpose of Disbursement
Refund

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: BF77B38702F4E45D181C

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2300.00

B.

Full Name (Last, First, Middle Initial)
Jeffrey Bellman

Mailing Address 220 Deer Park Ave

City State Zip Code
San Rafael CA 94901-2363

Purpose of Disbursement
Refund

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: B52307530F2334E4FB7F

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2300.00

C.

Full Name (Last, First, Middle Initial)
Martha S Brodsky

Mailing Address 2917 Jackson Avenue

City State Zip Code
Miami FL 33133-4572

Purpose of Disbursement
Refund

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: BFF1B4FD7713E46DBBA1

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2300.00

SUBTOTAL of Disbursements This Page (optional)

6900.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 101 / 159

☐ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a
☐ 27b ☒ 28a ☐ 28b ☐ 28c ☐ 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Mr. Richard E Brodsky

Mailing Address 2917 Jackson Ave

City
Miami

State
FL

Zip Code
33133-4572

Purpose of Disbursement
Refund

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: B44E9E556E5954FC7B9D

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2300.00

B.

Full Name (Last, First, Middle Initial)

Jacques Friedman

Mailing Address 4 Idar Ct Unit B

City
Greenwich

State
CT

Zip Code
06830

Purpose of Disbursement
Refund

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: B0590AD88C04D420C897

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2300.00

C.

Full Name (Last, First, Middle Initial)

Mr. Ronen Israel

Mailing Address 8 Oak Valley Lane

City
Purchase

State
NY

Zip Code
10577

Purpose of Disbursement
Refund

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: B34CC75802E80490EB13

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2300.00

SUBTOTAL of Disbursements This Page (optional)

6900.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 102 / 159

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Margaret Johnson	Transaction ID: BED30FAB225F34D85B4A Date of Disbursement																				
Mailing Address 18 Westwood Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	4		2	0	0	8												
City West Hartford State CT Zip Code 06117-2252	Amount of Each Disbursement this Period																				
Purpose of Disbursement Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Richard Kaplan	Transaction ID: B743CA8C2412B4C2B871 Date of Disbursement																				
Mailing Address PO Box 667; 43012 SE 108th St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	6		2	0	0	8												
City North Bend State WA Zip Code 98045	Amount of Each Disbursement this Period																				
Purpose of Disbursement Refund	<table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Joy Levin	Transaction ID: B7425BC21E3F04A8FB3C Date of Disbursement																				
Mailing Address 2 Chestnut Hill Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	4		2	0	0	8												
City Manalapan State NJ Zip Code 07726-8610	Amount of Each Disbursement this Period																				
Purpose of Disbursement Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

4850.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 103 / 159

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)
Michael Levin

Mailing Address 2 Chestnut Hill Drive

City Manalapan State NJ Zip Code 07726-8610

Purpose of Disbursement
Refund

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: B827518E8A2EA4F8B856

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2300.00

B.

Full Name (Last, First, Middle Initial)
Michelle Marra

Mailing Address 7 Cobtail Way

City Simsbury State CT Zip Code 06070-2530

Purpose of Disbursement
Refund

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: B825EE5D47B1448DB9D4

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2300.00

C.

Full Name (Last, First, Middle Initial)
Thomas Marra

Mailing Address 7 Cobtail Way

City Simsbury State CT Zip Code 06070-2530

Purpose of Disbursement
Refund

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: BA13055B9976A47ACB91

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2300.00

SUBTOTAL of Disbursements This Page (optional)

6900.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 104 / 159

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Ms. Mindy E Nagorsky

Mailing Address 8 Oak Valley Lane

City Purchase State NY Zip Code 10577

Purpose of Disbursement
Refund

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: B1BE715A714464288BB8

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2300.00

B.

Full Name (Last, First, Middle Initial)

Ms. Carolyn Surgent

Mailing Address 4 Idar Court
Unit B

City Greenwich State CT Zip Code 06830

Purpose of Disbursement
Refund

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: B543099B444574699A84

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2300.00

SUBTOTAL of Disbursements This Page (optional)

4600.00

TOTAL This Period (last page this line number only)

37050.00

SCHEDULE C (FEC Form 3P)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 105 / 159

FOR LINE NUMBER:
(check only one)☐ 19a
☒ 19bNAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

Transaction ID: C9F661A377D414848B83

LOAN SOURCE Full Name (Last, First, Middle Initial)

Webster Bank

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 185 Asylum Street

City Hartford State CT ZIP Code 06103-3401

Original Amount of Loan

1302811.25

Cumulative Payment To Date

501956.46

Balance Outstanding at Close of This Period

800854.79

TERMS

Date Incurred

M M D D Y Y Y Y
1 2 1 4 2 0 0 7

Date Due

20080430

Interest Rate

6.75 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

800854.79

TOTALS This Period (last page in this line only) ▶

800854.79

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 106 / 159

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Universal Printing Company LLC

Nature of Debt (Purpose):
Printing

Mailing Address 1101 Penn Avenue

City State ZIP Code
Scranton PA 18509

Outstanding Balance Beginning This Period

2327.31

Transaction ID: D0A1C9B9020DA4F7F9B3

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2327.31

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Universal Printing Company LLC

Nature of Debt (Purpose):
Printing

Mailing Address 1101 Penn Avenue

City State ZIP Code
Scranton PA 18509

Outstanding Balance Beginning This Period

411.45

Transaction ID: D0B46426F11F0465B888

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

411.45

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Universal Printing Company LLC

Nature of Debt (Purpose):
Printing

Mailing Address 1101 Penn Avenue

City State ZIP Code
Scranton PA 18509

Outstanding Balance Beginning This Period

348.36

Transaction ID: D68AD64DCDC624C69A94

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

348.36

1) **SUBTOTALS** This Period This Page (optional).....

3087.12

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 107 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
TVEyes, Inc.Nature of Debt (Purpose):
Media Services

Mailing Address 2150 Post Road

City State ZIP Code
Fairfield CT 06824

Outstanding Balance Beginning This Period

500.00

Transaction ID: D018D6F8488CD4328B41

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
The Immediacy GroupNature of Debt (Purpose):
Television

Mailing Address 1800 S Street

City State ZIP Code
Washington DC 20009

Outstanding Balance Beginning This Period

45000.00

Transaction ID: D4C86C8799F3445D78A5

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

45000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
The Immediacy GroupNature of Debt (Purpose):
Television

Mailing Address 1800 S Street

City State ZIP Code
Washington DC 20009

Outstanding Balance Beginning This Period

65000.00

Transaction ID: D6EC88DE849224213A22

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

65000.00

1) SUBTOTALS This Period This Page (optional).....

110500.00

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 108 / 159

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Newman and Leventhal Caterers, Inc.

Nature of Debt (Purpose):
Caterer

Mailing Address 45 West 81st Street

City State ZIP Code
New York NY 10024-6025

Outstanding Balance Beginning This Period

2136.07

Transaction ID: D2FDEA7A6FB3F461FA7F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2136.07

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Carter Printing

Nature of Debt (Purpose):
Printing

Mailing Address 1739 East Grand Avenue

City State ZIP Code
Des Moines IA 50316

Outstanding Balance Beginning This Period

7233.31

Transaction ID: D3239DDE2C2B14D02B40

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7233.31

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Freeman

Nature of Debt (Purpose):
Event Rental

Mailing Address P.O. Box 650036

City State ZIP Code
Dallas TX 75265-0036

Outstanding Balance Beginning This Period

2774.87

Transaction ID: D762D234592FA4797973

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2774.87

1) **SUBTOTALS** This Period This Page (optional).....

12144.25

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 109 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Hinckley SpringsNature of Debt (Purpose):
Water Cooler Services

Mailing Address P.O. Box 660579

City State ZIP Code
Dallas TX 75266-0579

Outstanding Balance Beginning This Period

296.68

Transaction ID: DFD07531348F8439BA68

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

296.68

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Universal Printing Company LLCNature of Debt (Purpose):
Printing

Mailing Address 1101 Penn Avenue

City State ZIP Code
Scranton PA 18509

Outstanding Balance Beginning This Period

485.08

Transaction ID: DC5C4695FC2C6478F875

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

485.08

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
The Immediacy GroupNature of Debt (Purpose):
Television

Mailing Address 1800 S Street

City State ZIP Code
Washington DC 20009

Outstanding Balance Beginning This Period

50000.00

Transaction ID: DE079EBE7C9854073A8E

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

50000.00

1) **SUBTOTALS** This Period This Page (optional).....

50781.76

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 110 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
The Dubuque LeaderNature of Debt (Purpose):
Printing

Mailing Address 1527 Central Avenue

City State ZIP Code
Dubuque IA 52004

Outstanding Balance Beginning This Period

360.50

Transaction ID: D308E0032B374413E8A3

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

360.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
UPSNature of Debt (Purpose):
Shipping

Mailing Address PO Box 7247-0244

City State ZIP Code
Philadelphia PA 19170

Outstanding Balance Beginning This Period

427.18

Transaction ID: DC7364FE5C9E54CCCA73

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

427.18

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Cedar Rapids Municipal UtilitiesNature of Debt (Purpose):
Utilities

Mailing Address PO Box 3255

City State ZIP Code
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

165.81

Transaction ID: D9457B91CEE0540E8A08

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

165.81

1) SUBTOTALS This Period This Page (optional).....

953.49

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 111 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Kilkenney'sNature of Debt (Purpose):
Food & Beverage

Mailing Address 300 West 3rd Street

City State ZIP Code
Davenport IA 52801-1208

Outstanding Balance Beginning This Period

220.00

Transaction ID: DE9F171102B294984BCD

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

220.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Cox CommunicationsNature of Debt (Purpose):
Internet Services

Mailing Address PO Box 6059

City State ZIP Code
Cypress CA 90630

Outstanding Balance Beginning This Period

138.02

Transaction ID: DEAECEB41D358C496EAEB

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

138.02

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Frontline ProductionsNature of Debt (Purpose):
Lighting & Video

Mailing Address 125 Hemlock Drive

City State ZIP Code
Deep River CT 06417

Outstanding Balance Beginning This Period

885.00

Transaction ID: DF269F8B8076845BAB94

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

885.00

1) SUBTOTALS This Period This Page (optional).....

1243.02

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 112 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Heartland Flagpoles and FlagsNature of Debt (Purpose):
Flags

Mailing Address 3719 SW 9th Street

City State ZIP Code
Des Moines IA 50315

Outstanding Balance Beginning This Period

436.60

Transaction ID: D42D026888D4F47D198F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

436.60

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Geoff LuxenbergNature of Debt (Purpose):
Reimbursement for Gas/Pay-
ment for signat

Mailing Address 249A New State Road

City State ZIP Code
Manchester CT 06042-7959

Outstanding Balance Beginning This Period

107.00

Transaction ID: D3BEB98490D8F4B87A07

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

107.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
U.S. Express Inc.Nature of Debt (Purpose):
Courier Services

Mailing Address 3240 Hubbard Road

City State ZIP Code
Landover MD 20785

Outstanding Balance Beginning This Period

160.24

Transaction ID: D80871DA60A7642ADAA1

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

160.24

1) SUBTOTALS This Period This Page (optional).....

703.84

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 113 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Metropolitan ClubNature of Debt (Purpose):
Food & Beverage

Mailing Address One East 60th Street

City State ZIP Code
New York NY 10022

Outstanding Balance Beginning This Period

21459.11

Transaction ID: D633B2D0BC9E641C0B52

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

21459.11

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
KeyspanNature of Debt (Purpose):
Utilities

Mailing Address 52 Second Avenue

City State ZIP Code
Waltham MA 02451

Outstanding Balance Beginning This Period

755.64

Transaction ID: D0F2F1D778B8B4FC99B6

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

755.64

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
KeyspanNature of Debt (Purpose):
Utilities

Mailing Address 52 Second Avenue

City State ZIP Code
Waltham MA 02451

Outstanding Balance Beginning This Period

2919.27

Transaction ID: D9A45BD2CD468457093F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2919.27

1) SUBTOTALS This Period This Page (optional).....

25134.02

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 114 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
KeyspanNature of Debt (Purpose):
Utilities

Mailing Address 52 Second Avenue

City State ZIP Code
Waltham MA 02451

Outstanding Balance Beginning This Period

38.96

Transaction ID: D7B85A230D64E4671B06

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

38.96

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
KeyspanNature of Debt (Purpose):
Utilities

Mailing Address 52 Second Avenue

City State ZIP Code
Waltham MA 02451

Outstanding Balance Beginning This Period

164.80

Transaction ID: DB9074E8EDA3B4C25ABE

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

164.80

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
KeyspanNature of Debt (Purpose):
Utilities

Mailing Address 52 Second Avenue

City State ZIP Code
Waltham MA 02451

Outstanding Balance Beginning This Period

239.04

Transaction ID: DD0258CA80C884AB6960

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

239.04

1) SUBTOTALS This Period This Page (optional).....

442.80

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 115 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
KeyspanNature of Debt (Purpose):
Utilities

Mailing Address 52 Second Avenue

City State ZIP Code
Waltham MA 02451

Outstanding Balance Beginning This Period

118.88

Transaction ID: DBDF3A2CB333C4D6484D

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

118.88

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
KeyspanNature of Debt (Purpose):
Utilities

Mailing Address 52 Second Avenue

City State ZIP Code
Waltham MA 02451

Outstanding Balance Beginning This Period

298.81

Transaction ID: D74946712598A4C599FE

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

298.81

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
KeyspanNature of Debt (Purpose):
Utilities

Mailing Address 52 Second Avenue

City State ZIP Code
Waltham MA 02451

Outstanding Balance Beginning This Period

1481.16

Transaction ID: DDFA00C779CF445C8AA6

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1481.16

1) SUBTOTALS This Period This Page (optional).....

1898.85

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 116 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Perkins CoieNature of Debt (Purpose):
Legal ServicesMailing Address Centralized Accounting Dept.
1201 Third Ave., 40th FloorCity State ZIP Code
Seattle WA 98101-3099

Outstanding Balance Beginning This Period

25233.00

Transaction ID: DDAAD6917DA7140B1B6D

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

25233.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Perkins CoieNature of Debt (Purpose):
Legal ServicesMailing Address Centralized Accounting Dept.
1201 Third Ave., 40th FloorCity State ZIP Code
Seattle WA 98101-3099

Outstanding Balance Beginning This Period

25134.72

Transaction ID: D2900156C49674E41A2B

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

25134.72

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Charles George Trucking Co., Inc.Nature of Debt (Purpose):
Utilities

Mailing Address PO Box 857

City State ZIP Code
Londonberry NH 03053

Outstanding Balance Beginning This Period

535.52

Transaction ID: D6710E52FE45143BEBAF

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

535.52

1) SUBTOTALS This Period This Page (optional).....

50903.24

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 117 / 159

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Embarq

Nature of Debt (Purpose):
Telephone

Mailing Address PO Box 660068

City State ZIP Code
Dallas TX 75266

Outstanding Balance Beginning This Period

1064.16

Transaction ID: DBF0B293CD60A40ED8E0

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1064.16

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Embarq

Nature of Debt (Purpose):
Telephone

Mailing Address PO Box 660068

City State ZIP Code
Dallas TX 75266

Outstanding Balance Beginning This Period

378.82

Transaction ID: DF4A4422265684FB29B9

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

378.82

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
AT&T

Nature of Debt (Purpose):
Telephone

Mailing Address P.O. Box 8110

City State ZIP Code
Aurora IL 60572

Outstanding Balance Beginning This Period

304.30

Transaction ID: DD45DB76A7149485EADE

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

304.30

1) **SUBTOTALS** This Period This Page (optional).....

1747.28

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 118 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
AT&TNature of Debt (Purpose):
Telephone

Mailing Address P.O. Box 8110

City State ZIP Code
Aurora IL 60572

Outstanding Balance Beginning This Period

1861.62

Transaction ID: DFE38B3A3574543178FC

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1861.62

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
AT&TNature of Debt (Purpose):
Telephone

Mailing Address P.O. Box 8110

City State ZIP Code
Aurora IL 60572

Outstanding Balance Beginning This Period

1055.11

Transaction ID: D561E5E0579E7422A8F4

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1055.11

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Waste ManagementNature of Debt (Purpose):
Utilities

Mailing Address PO Box 756

City State ZIP Code
Des Moines IA 50303

Outstanding Balance Beginning This Period

149.94

Transaction ID: D26D95FA926E146209F5

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

149.94

1) SUBTOTALS This Period This Page (optional).....

3066.67

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 119 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Perkins CoieNature of Debt (Purpose):
Legal ServicesMailing Address Centralized Accounting Dept.
1201 Third Ave., 40th FloorCity State ZIP Code
Seattle WA 98101-3099

Outstanding Balance Beginning This Period

25037.09

Transaction ID: D2550339EB07C40E994D

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

25037.09

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Perkins CoieNature of Debt (Purpose):
Legal ServicesMailing Address Centralized Accounting Dept.
1201 Third Ave., 40th FloorCity State ZIP Code
Seattle WA 98101-3099

Outstanding Balance Beginning This Period

20016.20

Transaction ID: D14FCCBCA21B449EB877

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20016.20

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Koch BrothersNature of Debt (Purpose):
CopierMailing Address 325 Grand Avenue
P.O. Box 1755City State ZIP Code
Des Moines IA 50306

Outstanding Balance Beginning This Period

126.82

Transaction ID: DFAE4308D10124EEDAE3

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

126.82

1) **SUBTOTALS** This Period This Page (optional).....

45180.11

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 120 / 159

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Koch Brothers

Nature of Debt (Purpose):
Copier

Mailing Address 325 Grand Avenue
P.O. Box 1755

City State ZIP Code
Des Moines IA 50306

Outstanding Balance Beginning This Period

318.00

Transaction ID: D49C4F11B6E044AA5A29

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

318.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Koch Brothers

Nature of Debt (Purpose):
Copier

Mailing Address 325 Grand Avenue
P.O. Box 1755

City State ZIP Code
Des Moines IA 50306

Outstanding Balance Beginning This Period

318.00

Transaction ID: D3176BA92E7384BCA0A

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

318.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Koch Brothers

Nature of Debt (Purpose):
Copier

Mailing Address 325 Grand Avenue
P.O. Box 1755

City State ZIP Code
Des Moines IA 50306

Outstanding Balance Beginning This Period

211.99

Transaction ID: D3C51D93654FD40B59BB

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

211.99

1) **SUBTOTALS** This Period This Page (optional).....

847.99

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 121 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
VerizonNature of Debt (Purpose):
Monthly Phone Charges

Mailing Address 8808 Irvine Center Drive

City State ZIP Code
Irvine CA 92618-4201

Outstanding Balance Beginning This Period

140.70

Transaction ID: D40B8D89E3ABE4545B3C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

140.70

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
VerizonNature of Debt (Purpose):
Monthly Phone Charges

Mailing Address 8808 Irvine Center Drive

City State ZIP Code
Irvine CA 92618-4201

Outstanding Balance Beginning This Period

324.97

Transaction ID: DC3EE07A89ADF414596B

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

324.97

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
VerizonNature of Debt (Purpose):
Monthly Phone Charges

Mailing Address 8808 Irvine Center Drive

City State ZIP Code
Irvine CA 92618-4201

Outstanding Balance Beginning This Period

625.92

Transaction ID: D7AA61021F4A546ABB58

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

625.92

1) SUBTOTALS This Period This Page (optional).....

1091.59

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 122 / 159

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Verizon

Nature of Debt (Purpose):
Monthly Phone Charges

Mailing Address 8808 Irvine Center Drive

City State ZIP Code
Irvine CA 92618-4201

Outstanding Balance Beginning This Period

285.25

Transaction ID: D59D402EB48494DF2B2C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

285.25

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Verizon

Nature of Debt (Purpose):
Monthly Phone Charges

Mailing Address 8808 Irvine Center Drive

City State ZIP Code
Irvine CA 92618-4201

Outstanding Balance Beginning This Period

281.01

Transaction ID: DB59E8AD1B4CC46098EF

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

281.01

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Verizon

Nature of Debt (Purpose):
Monthly Phone Charges

Mailing Address 8808 Irvine Center Drive

City State ZIP Code
Irvine CA 92618-4201

Outstanding Balance Beginning This Period

561.93

Transaction ID: DA1C685B9BFAF4CD7A76

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

561.93

1) **SUBTOTALS** This Period This Page (optional).....

1128.19

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 123 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
VerizonNature of Debt (Purpose):
Monthly Phone Charges

Mailing Address 8808 Irvine Center Drive

City State ZIP Code
Irvine CA 92618-4201

Outstanding Balance Beginning This Period

680.73

Transaction ID: D0F58D7FEFA5B4E43939

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

680.73

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ABC-Electrical ContractorsNature of Debt (Purpose):
Phone WorkMailing Address 10520 Hickman Road
Suite ABCCity State ZIP Code
Des Moines IA 50325

Outstanding Balance Beginning This Period

1866.01

Transaction ID: DADFAFC251E1148F6B40

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1866.01

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Simard PrintingNature of Debt (Purpose):
Printing Services

Mailing Address 300 Salem Street

City State ZIP Code
Woburn MA 01801-2055

Outstanding Balance Beginning This Period

433.13

Transaction ID: DAEB900B19D5343069F1

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

433.13

1) SUBTOTALS This Period This Page (optional).....

2979.87

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 124 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Old Town Family RestaurantNature of Debt (Purpose):
Food & Beverage

Mailing Address 2107 Camanche Avenue

City State ZIP Code
Clinton IA 52732-6036

Outstanding Balance Beginning This Period

130.00

Transaction ID: D8B59DA12044449C0AE9

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

130.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MoreSound CompanyNature of Debt (Purpose):
Sound Equipment

Mailing Address 102 North Street

City State ZIP Code
Jaffrey NH 03452-5301

Outstanding Balance Beginning This Period

400.00

Transaction ID: D4310E2A2AC3D49AFB1C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

400.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Washington Promotions & PrintingNature of Debt (Purpose):
PrintingMailing Address 5125 MacArthur Blvd. NW
Suite 14City State ZIP Code
Washington DC 20016

Outstanding Balance Beginning This Period

5547.90

Transaction ID: DE815690D20EF4A6EB02

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5547.90

1) SUBTOTALS This Period This Page (optional).....

6077.90

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 125 / 159

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
UPS

Nature of Debt (Purpose):
Shipping

Mailing Address PO Box 7247-0244

City State ZIP Code
Philadelphia PA 19170

Outstanding Balance Beginning This Period

434.09

Transaction ID: D93A99FFBC04A4242996

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

434.09

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
UPS

Nature of Debt (Purpose):
Shipping

Mailing Address PO Box 7247-0244

City State ZIP Code
Philadelphia PA 19170

Outstanding Balance Beginning This Period

60.76

Transaction ID: D6EB2D896D8C64BA8AA9

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

60.76

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Qwest

Nature of Debt (Purpose):
Telephone

Mailing Address Business Services
PO Box 91154

City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

1062.75

Transaction ID: D61C348CBB0624AED874

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1062.75

1) **SUBTOTALS** This Period This Page (optional).....

1557.60

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 126 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
QwestNature of Debt (Purpose):
TelephoneMailing Address Business Services
PO Box 91154City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

669.82

Transaction ID: D6224518C358E4E34936

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

669.82

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
QwestNature of Debt (Purpose):
TelephoneMailing Address Business Services
PO Box 91154City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

474.82

Transaction ID: DD4C14996C4ED457DBEB

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

474.82

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
QwestNature of Debt (Purpose):
TelephoneMailing Address Business Services
PO Box 91154City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

657.85

Transaction ID: D160BB52601F3469FBFA

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

657.85

1) SUBTOTALS This Period This Page (optional).....

1802.49

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 127 / 159

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Qwest

Nature of Debt (Purpose):
Telephone

Mailing Address Business Services
PO Box 91154

City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

471.50

Transaction ID: DE70EBFB35F4E4F5BBA8

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

471.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Qwest

Nature of Debt (Purpose):
Telephone

Mailing Address Business Services
PO Box 91154

City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

58.58

Transaction ID: DC07FD8583E3F4BA58CA

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

58.58

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Qwest

Nature of Debt (Purpose):
Telephone

Mailing Address Business Services
PO Box 91154

City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

418.15

Transaction ID: DA397374A80A8418D9FD

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

418.15

1) **SUBTOTALS** This Period This Page (optional).....

948.23

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 128 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
QwestNature of Debt (Purpose):
TelephoneMailing Address Business Services
PO Box 91154City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

575.42

Transaction ID: DA3182C7E844C4F039CE

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

575.42

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
QwestNature of Debt (Purpose):
TelephoneMailing Address Business Services
PO Box 91154City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

431.46

Transaction ID: D703363A20B0E44A7A6C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

431.46

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
QwestNature of Debt (Purpose):
TelephoneMailing Address Business Services
PO Box 91154City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

106.73

Transaction ID: DE2EA2BD913EF4C59A0F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

106.73

1) SUBTOTALS This Period This Page (optional).....

1113.61

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 129 / 159

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Qwest

Nature of Debt (Purpose):
Telephone

Mailing Address Business Services
PO Box 91154

City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

677.36

Transaction ID: DF660180FF5C543E886F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

677.36

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Qwest

Nature of Debt (Purpose):
Telephone

Mailing Address Business Services
PO Box 91154

City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

622.51

Transaction ID: DA75CCBF704CB4716B86

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

622.51

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Alliant Energy

Nature of Debt (Purpose):
Utilities

Mailing Address PO Box 3066

City State ZIP Code
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

540.80

Transaction ID: D4DB84BA83BD34248B12

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

540.80

1) **SUBTOTALS** This Period This Page (optional).....

1840.67

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 130 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Alliant EnergyNature of Debt (Purpose):
Utilities

Mailing Address PO Box 3066

City State ZIP Code
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

852.59

Transaction ID: D21C371285AF1401F9CB

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

852.59

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Alliant EnergyNature of Debt (Purpose):
Utilities

Mailing Address PO Box 3066

City State ZIP Code
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

254.12

Transaction ID: D637921B16CAA45B19B6

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

254.12

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Alliant EnergyNature of Debt (Purpose):
Utilities

Mailing Address PO Box 3066

City State ZIP Code
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

877.55

Transaction ID: D6F4061A34DE04783A3F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

877.55

1) SUBTOTALS This Period This Page (optional).....

1984.26

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 131 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Alliant EnergyNature of Debt (Purpose):
Utilities

Mailing Address PO Box 3066

City State ZIP Code
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

50.75

Transaction ID: DF36117C0589D4D9C911

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

50.75

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Alliant EnergyNature of Debt (Purpose):
Utilities

Mailing Address PO Box 3066

City State ZIP Code
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

401.72

Transaction ID: D5B3618F71E3745EC9DD

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

401.72

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Alliant EnergyNature of Debt (Purpose):
Utilities

Mailing Address PO Box 3066

City State ZIP Code
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

239.60

Transaction ID: DE6029EBE091B415FB6D

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

239.60

1) SUBTOTALS This Period This Page (optional).....

692.07

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 132 / 159

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Alliant Energy

Nature of Debt (Purpose):
Utilities

Mailing Address PO Box 3066

City State ZIP Code
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

263.55

Transaction ID: DBA39930B48064589AB5

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

263.55

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Allied Telecom

Nature of Debt (Purpose):
Internet Services

Mailing Address PO BOX 758792

City State ZIP Code
Baltimore MD 21275

Outstanding Balance Beginning This Period

850.00

Transaction ID: DEA9D9C89FC7F444DAD8

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

850.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
COVAD

Nature of Debt (Purpose):
Internet Services

Mailing Address Dept. 33408
PO BOX 39000

City State ZIP Code
San Francisco CA 94139

Outstanding Balance Beginning This Period

1535.76

Transaction ID: D5E78BD6138D849C8A7B

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1535.76

1) **SUBTOTALS** This Period This Page (optional).....

2649.31

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 133 / 159

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
COVAD

Nature of Debt (Purpose):
Internet Services

Mailing Address Dept. 33408
PO BOX 39000

City State ZIP Code
San Francisco CA 94139

Outstanding Balance Beginning This Period

1056.76

Transaction ID: D7FB209F7C488450BA73

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1056.76

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Free Media, Inc.

Nature of Debt (Purpose):
Reimbursement for Travel
Expenses

Mailing Address 777 West End Avenue
#5C

City State ZIP Code
New York NY 10025

Outstanding Balance Beginning This Period

635.01

Transaction ID: DF03B1B1603F54C5183C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

635.01

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Free Media, Inc.

Nature of Debt (Purpose):
Reimbursement for Phone
Expenses

Mailing Address 777 West End Avenue
#5C

City State ZIP Code
New York NY 10025

Outstanding Balance Beginning This Period

150.09

Transaction ID: D142C4EE26CC3459DA22

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

150.09

1) **SUBTOTALS** This Period This Page (optional).....

1841.86

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 134 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
TravelersNature of Debt (Purpose):
InsuranceMailing Address CL & Specialty Remittance Center
Remittance Box 96359City State ZIP Code
Hartford CT 06183-1008

Outstanding Balance Beginning This Period

10330.00

Transaction ID: D490B4AF8A85D4E99B96

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10330.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ExxonMobilNature of Debt (Purpose):
Gasoline

Mailing Address P.O. Box 688938

City State ZIP Code
Des Moines IA 50368-8938

Outstanding Balance Beginning This Period

241.86

Transaction ID: D303F42DD72104352BB3

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

241.86

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ExxonMobilNature of Debt (Purpose):
Gasoline

Mailing Address P.O. Box 688938

City State ZIP Code
Des Moines IA 50368-8938

Outstanding Balance Beginning This Period

429.36

Transaction ID: D2591D51138CC454BA3F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

429.36

1) **SUBTOTALS** This Period This Page (optional).....

11001.22

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 135 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
TVEyes, Inc.Nature of Debt (Purpose):
Media Services

Mailing Address 2150 Post Road

City State ZIP Code
Fairfield CT 06824

Outstanding Balance Beginning This Period

500.00

Transaction ID: D421D5108046A4FA4973

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
TVEyes, Inc.Nature of Debt (Purpose):
Media Services

Mailing Address 2150 Post Road

City State ZIP Code
Fairfield CT 06824

Outstanding Balance Beginning This Period

500.00

Transaction ID: DF1403972FFAD472384D

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Verham NewsNature of Debt (Purpose):
Rent

Mailing Address P.O. Box 706

City State ZIP Code
White Riv Jct VT 05001-0706

Outstanding Balance Beginning This Period

910.28

Transaction ID: DE2E3D979014F4B2194A

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

910.28

1) SUBTOTALS This Period This Page (optional).....

1910.28

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 136 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
ComcastNature of Debt (Purpose):
Cable & Internet

Mailing Address PO Box 1577

City State ZIP Code
Newark NJ 07101

Outstanding Balance Beginning This Period

351.30

Transaction ID: D3A3A16E658A34B44B21

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

351.30

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ComcastNature of Debt (Purpose):
Cable Service

Mailing Address PO Box 1577

City State ZIP Code
Newark NJ 07101

Outstanding Balance Beginning This Period

513.74

Transaction ID: D054E2AB68F284AAA9A7

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

513.74

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Public Service of New HampshireNature of Debt (Purpose):
Utilities

Mailing Address P.O. Box 360

City State ZIP Code
Manchester NH 03105-0360

Outstanding Balance Beginning This Period

376.44

Transaction ID: DD1D454DB157C4318B67

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

376.44

1) SUBTOTALS This Period This Page (optional).....

1241.48

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 137 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Public Service of New HampshireNature of Debt (Purpose):
Utilities

Mailing Address P.O. Box 360

City State ZIP Code
Manchester NH 03105-0360

Outstanding Balance Beginning This Period

246.08

Transaction ID: DE82D6F912C4D47CB9A5

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

246.08

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Public Service of New HampshireNature of Debt (Purpose):
Utilities

Mailing Address P.O. Box 360

City State ZIP Code
Manchester NH 03105-0360

Outstanding Balance Beginning This Period

993.78

Transaction ID: D5B30D2CCB1A941208DC

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

993.78

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Public Service of New HampshireNature of Debt (Purpose):
Utilities

Mailing Address P.O. Box 360

City State ZIP Code
Manchester NH 03105-0360

Outstanding Balance Beginning This Period

131.82

Transaction ID: D5B0C3B4DA75E4096B6A

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

131.82

1) SUBTOTALS This Period This Page (optional).....

1371.68

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 138 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Operations UnLimited, Inc.Nature of Debt (Purpose):
Office Operations

Mailing Address 113 Hilands Place

City State ZIP Code
Pittsburgh PA 15237

Outstanding Balance Beginning This Period

280.00

Transaction ID: D7C7D4BF737944E5A9A0

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

280.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Operations UnLimited, Inc.Nature of Debt (Purpose):
Office Operations Consult-
ing

Mailing Address 113 Hilands Place

City State ZIP Code
Pittsburgh PA 15237

Outstanding Balance Beginning This Period

2648.11

Transaction ID: D0126046A41F34134AE6

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2648.11

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Pentimento Design LLCNature of Debt (Purpose):
Reindeer decorations

Mailing Address 1133 Mapleton Avenue

City State ZIP Code
Suffield CT 06078

Outstanding Balance Beginning This Period

212.00

Transaction ID: DF4C1AA581F164ADAB6A

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

212.00

1) SUBTOTALS This Period This Page (optional).....

3140.11

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 139 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Mason City Public UtilitiesNature of Debt (Purpose):
Utilities

Mailing Address 10 First Street Northwest

City State ZIP Code
Mason City IA 50401-3224

Outstanding Balance Beginning This Period

123.36

Transaction ID: DDE7D15C566704EE4997

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

123.36

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ComcastNature of Debt (Purpose):
Cable Service

Mailing Address P.O. Box 3005

City State ZIP Code
Southeastern PA 19398-3005

Outstanding Balance Beginning This Period

197.56

Transaction ID: D1327435AF7974016BBD

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

197.56

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ComcastNature of Debt (Purpose):
Cable

Mailing Address P.O. Box 3005

City State ZIP Code
Southeastern PA 19398-3005

Outstanding Balance Beginning This Period

130.78

Transaction ID: D77C21BCA099B4529A8B

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

130.78

1) SUBTOTALS This Period This Page (optional).....

451.70

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 140 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
VerizonNature of Debt (Purpose):
Telephone

Mailing Address PO Box 660720

City State ZIP Code
Dallas TX 75266

Outstanding Balance Beginning This Period

22.28

Transaction ID: DF9E84213BC0C4FA4959

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

22.28

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
VerizonNature of Debt (Purpose):
Telephone

Mailing Address PO Box 660720

City State ZIP Code
Dallas TX 75266

Outstanding Balance Beginning This Period

6277.73

Transaction ID: D0A801840ADAA424FBF4

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6277.73

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
VFW Post 775Nature of Debt (Purpose):
Space Rental

Mailing Address 702 West Main Street

City State ZIP Code
Ottumwa IA 52501-2226

Outstanding Balance Beginning This Period

150.00

Transaction ID: D9F4487EF4F6F4DB6923

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

150.00

1) SUBTOTALS This Period This Page (optional).....

6450.01

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 141 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
VerizonNature of Debt (Purpose):
Telephone

Mailing Address P.O. Box 15041

City State ZIP Code
Worcester MA 01615-0023

Outstanding Balance Beginning This Period

647.11

Transaction ID: DC05308729895455AAF0

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

647.11

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
VerizonNature of Debt (Purpose):
Telephone

Mailing Address P.O. Box 15041

City State ZIP Code
Worcester MA 01615-0023

Outstanding Balance Beginning This Period

896.07

Transaction ID: D03866EA927C6487BAA8

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

896.07

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
VerizonNature of Debt (Purpose):
Telephone

Mailing Address P.O. Box 15041

City State ZIP Code
Worcester MA 01615-0023

Outstanding Balance Beginning This Period

694.96

Transaction ID: D7AA2635D35294D99959

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

694.96

1) SUBTOTALS This Period This Page (optional).....

2238.14

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 142 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
VerizonNature of Debt (Purpose):
Telephone

Mailing Address P.O. Box 15041

City State ZIP Code
Worcester MA 01615-0023

Outstanding Balance Beginning This Period

983.75

Transaction ID: DAC79A50A402441AB9DA

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

983.75

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
VerizonNature of Debt (Purpose):
Telephone

Mailing Address P.O. Box 15041

City State ZIP Code
Worcester MA 01615-0023

Outstanding Balance Beginning This Period

320.68

Transaction ID: DAB48C0D1D9BF48E2819

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

320.68

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
VerizonNature of Debt (Purpose):
Telephone

Mailing Address P.O. Box 15041

City State ZIP Code
Worcester MA 01615-0023

Outstanding Balance Beginning This Period

1646.22

Transaction ID: D684E05F5028F4B9FA8C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1646.22

1) SUBTOTALS This Period This Page (optional).....

2950.65

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 143 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Des Moines Theatrical ShopNature of Debt (Purpose):
Costume Rental

Mailing Address 145 5th Street

City State ZIP Code
West Des Moines IA 50265

Outstanding Balance Beginning This Period

106.00

Transaction ID: D7952AAF64B9C4F0997B

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

106.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Des Moines Water WorksNature of Debt (Purpose):
Utilities

Mailing Address 2201 George Flagg Parkway

City State ZIP Code
Des Moines IA 50321-1190

Outstanding Balance Beginning This Period

117.91

Transaction ID: D1475748209CF4A0092F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

117.91

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
REMAX Results RealtyNature of Debt (Purpose):
Rent and Utilities

Mailing Address 202 1st NW

City State ZIP Code
Mason City IA 50401

Outstanding Balance Beginning This Period

1036.46

Transaction ID: D14F42980C9EF465D8A0

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1036.46

1) **SUBTOTALS** This Period This Page (optional).....

1260.37

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 144 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Jocelyn Augustino PhotogrpaherNature of Debt (Purpose):
Photographer

Mailing Address 3416 Gunston Road

City State ZIP Code
Alexandria VA 22302-2134

Outstanding Balance Beginning This Period

69.00

Transaction ID: D0781506CE4AC48A0805

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

69.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Deaf Services UnlimitedNature of Debt (Purpose):
Interpreting Service

Mailing Address Suite 170

City State ZIP Code
Des Moines IA 50309

Outstanding Balance Beginning This Period

130.00

Transaction ID: DF8A44964B3424CC3B77

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

130.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Drink More WaterNature of Debt (Purpose):
Water DeliveryMailing Address Montgomery County Airpark
7595-A Rickenbacker DriveCity State ZIP Code
Gaithersburg MD 20879

Outstanding Balance Beginning This Period

32.50

Transaction ID: DCDE895EA2CFC4A338ED

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

32.50

1) **SUBTOTALS** This Period This Page (optional).....

231.50

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 145 / 159

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
NexGen

Nature of Debt (Purpose):
Utilities

Mailing Address 10500 Hickman Road Ste J

City State ZIP Code
Clive IA 50325-3706

Outstanding Balance Beginning This Period

235.36

Transaction ID: D2FBA9339003447ADB22

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

235.36

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Mediacom

Nature of Debt (Purpose):
Cable

Mailing Address P.O. Box 5744

City State ZIP Code
Carol Stream IL 60197-5744

Outstanding Balance Beginning This Period

92.37

Transaction ID: D34D4235A01F441BAA58

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

92.37

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
WHO Newsradio 1040

Nature of Debt (Purpose):
Recording Services

Mailing Address 2141 Grand Avenue

City State ZIP Code
Des Moines IA 50312

Outstanding Balance Beginning This Period

400.00

Transaction ID: D5CA66406DA5143F7848

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

400.00

1) **SUBTOTALS** This Period This Page (optional).....

727.73

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 146 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
DC TreasurerNature of Debt (Purpose):
Parking FineMailing Address Adjudication Services
PO Box 2014City State ZIP Code
Washington DC 20013

Outstanding Balance Beginning This Period

5.00

Transaction ID: DF17F5AFCCC744C43A1E

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Storefront Political MediaNature of Debt (Purpose):
Photographer

Mailing Address 250 Sutter Street, Suite 650

City State ZIP Code
San Francisco CA 94108

Outstanding Balance Beginning This Period

537.08

Transaction ID: DDB39DC1EDB03445B8B5

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

537.08

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Bi-State Cartridge Service, Inc.Nature of Debt (Purpose):
Office Supplies

Mailing Address 1325 15th Street

City State ZIP Code
Moline IL 61265

Outstanding Balance Beginning This Period

130.54

Transaction ID: D163D453900874450889

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

130.54

1) SUBTOTALS This Period This Page (optional).....

672.62

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 147 / 159

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Direct TV

Nature of Debt (Purpose):
Cable Service

Mailing Address PO Box 60036

City State ZIP Code
Los Angeles CA 90060

Outstanding Balance Beginning This Period

166.33

Transaction ID: D8A78FBAECFAE431F9D3

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

166.33

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Direct TV

Nature of Debt (Purpose):
Cable Service

Mailing Address PO Box 60036

City State ZIP Code
Los Angeles CA 90060

Outstanding Balance Beginning This Period

44.26

Transaction ID: DBC6FF85AE35C41E68CA

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

44.26

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Direct TV

Nature of Debt (Purpose):
Cable Service

Mailing Address PO Box 60036

City State ZIP Code
Los Angeles CA 90060

Outstanding Balance Beginning This Period

32.22

Transaction ID: D98583EF190B742F4B0A

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

32.22

1) **SUBTOTALS** This Period This Page (optional).....

242.81

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 148 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Air Charter Team, Inc.Nature of Debt (Purpose):
TransportationMailing Address 10015 N.W. Ambassador Drive
Suite 202City State ZIP Code
Kansas City MO 64153

Outstanding Balance Beginning This Period

1304.61

Transaction ID: DCAA2DBC5CEA94CD089C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1304.61

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Zahara's Cafe & Bakery, Inc.Nature of Debt (Purpose):
Food & Beverage

Mailing Address 525 Washington Blvd, 2nd Flr

City State ZIP Code
Jersey City NJ 07310

Outstanding Balance Beginning This Period

2500.00

Transaction ID: DD281F4AE8DC34BC7B93

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
The Printer WorksNature of Debt (Purpose):
Printer

Mailing Address 3481 Arden Road

City State ZIP Code
Hayward CA 94545

Outstanding Balance Beginning This Period

819.44

Transaction ID: DFC2998A4374B4E86BCA

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

819.44

1) SUBTOTALS This Period This Page (optional).....

4624.05

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 149 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
MidAmerican EnergyNature of Debt (Purpose):
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

416.01

Transaction ID: D91E4CB1724CB455C94A

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

416.01

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MidAmerican EnergyNature of Debt (Purpose):
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

1115.75

Transaction ID: DEC21CC9229D5404F97B

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1115.75

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MidAmerican EnergyNature of Debt (Purpose):
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

659.58

Transaction ID: DFC448EB6B1054323A65

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

659.58

1) SUBTOTALS This Period This Page (optional).....

2191.34

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 150 / 159

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MidAmerican Energy

Nature of Debt (Purpose):
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

72.04

Transaction ID: D275E706E6F7F4C6C938

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

72.04

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MidAmerican Energy

Nature of Debt (Purpose):
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

123.36

Transaction ID: DF30D747F375F47E5882

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

123.36

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MidAmerican Energy

Nature of Debt (Purpose):
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

196.90

Transaction ID: DAB442CA849544E83A13

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

196.90

1) **SUBTOTALS** This Period This Page (optional).....

392.30

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 151 / 159

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MidAmerican Energy

Nature of Debt (Purpose):
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

1406.57

Transaction ID: DB92957A464EF4AC685D

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1406.57

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MidAmerican Energy

Nature of Debt (Purpose):
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

65.24

Transaction ID: D7B3E6DAFE5CE4AFB9B8

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

65.24

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MidAmerican Energy

Nature of Debt (Purpose):
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

78.77

Transaction ID: D2F929A7374FC4A50B84

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

78.77

1) **SUBTOTALS** This Period This Page (optional).....

1550.58

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 152 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Peter NicholsNature of Debt (Purpose):
Consulting Fee

Mailing Address 222 Stony Brook Road

City State ZIP Code
Hopewell NJ 08525-3003

Outstanding Balance Beginning This Period

15000.00

Transaction ID: DE18E31E6A6564CF4B75

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
UPSNature of Debt (Purpose):
Shippng

Mailing Address PO Box 7247-0244

City State ZIP Code
Philadelphia PA 19170

Outstanding Balance Beginning This Period

126.91

Transaction ID: D46BD2137637F4679A43

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

126.91

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Jim VanDusseldorpNature of Debt (Purpose):
Bus Servicing

Mailing Address 2406 15th Ave. N.

City State ZIP Code
Clear Lake IA 50428-2037

Outstanding Balance Beginning This Period

92.50

Transaction ID: DECE5259C4BB240ADBB7

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

92.50

1) **SUBTOTALS** This Period This Page (optional).....

15219.41

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 153 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Universal Printing Company LLCNature of Debt (Purpose):
Fees

Mailing Address 1101 Penn Avenue

City State ZIP Code
Scranton PA 18509

Outstanding Balance Beginning This Period

136.05

Transaction ID: DF477C3FE35E04A05B7F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

136.05

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
UnitilNature of Debt (Purpose):
Utilities

Mailing Address PO BOx 2013

City State ZIP Code
Concord NH 03302

Outstanding Balance Beginning This Period

115.06

Transaction ID: D14B3EB6706674783815

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

115.06

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Northern Business MachinesNature of Debt (Purpose):
Rental

Mailing Address 24 Terry Avenue

City State ZIP Code
Burlington MA 01803

Outstanding Balance Beginning This Period

698.00

Transaction ID: DF72BE3ADBBB14CB9BC7

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

698.00

1) SUBTOTALS This Period This Page (optional).....

949.11

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 154 / 159

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Grand Colony

Nature of Debt (Purpose):
Lodging

Mailing Address 2824 Grand Avenue, #218

City State ZIP Code
Des Moines IA 50312

Outstanding Balance Beginning This Period

153.50

Transaction ID: D232577C9B94046BB9A9

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

153.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Webster Bank

Nature of Debt (Purpose):
Loan interest payment

Mailing Address 185 Asylum Street

City State ZIP Code
Hartford CT 06103-3401

Outstanding Balance Beginning This Period

4177.74

Transaction ID: D2455C9526EE244CC9BA

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4177.74

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
AT&T

Nature of Debt (Purpose):
Telephone

Mailing Address P.O. Box 8110

City State ZIP Code
Aurora IL 60572

Outstanding Balance Beginning This Period

111.80

Transaction ID: D51DCEF2884624EE6A6A

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

111.80

1) **SUBTOTALS** This Period This Page (optional).....

4443.04

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 155 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
PMINature of Debt (Purpose):
Parking

Mailing Address

City State ZIP Code
Washington DC

Outstanding Balance Beginning This Period

465.00

Transaction ID: D8747457AA9894F1CB0C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

465.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
UPSNature of Debt (Purpose):
Shipping

Mailing Address PO Box 7247-0244

City State ZIP Code
Philadelphia PA 19170

Outstanding Balance Beginning This Period

59.43

Transaction ID: DBA9563936FE04325AD0

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

59.43

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Carter PrintingNature of Debt (Purpose):
Finance Charge

Mailing Address 1739 East Grand Avenue

City State ZIP Code
Des Moines IA 50316

Outstanding Balance Beginning This Period

110.59

Transaction ID: D7499897E1ABB4EE2962

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

110.59

1) SUBTOTALS This Period This Page (optional).....

635.02

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 156 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Northland Trumbull, LLCNature of Debt (Purpose):
RentMailing Address C/o Northland Investment Corporati
P.O. Box 845604City State ZIP Code
Boston MA 02284

Outstanding Balance Beginning This Period

0.00

Transaction ID: D27B30042D3C24348857

Amount Incurred This Period

3850.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3850.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Heartland Flagpoles and FlagsNature of Debt (Purpose):
Flags

Mailing Address 3719 SW 9th Street

City State ZIP Code
Des Moines IA 50315

Outstanding Balance Beginning This Period

0.00

Transaction ID: D92D91DF93AE6487B8F3

Amount Incurred This Period

215.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

215.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Webster BankNature of Debt (Purpose):
Loan Interest payment

Mailing Address 185 Asylum Street

City State ZIP Code
Hartford CT 06103-3401

Outstanding Balance Beginning This Period

0.00

Transaction ID: DA8EF061F679D4CBB9F4

Amount Incurred This Period

7056.90

Payment This Period

0.00

Outstanding Balance at Close of This Period

7056.90

1) SUBTOTALS This Period This Page (optional).....

11121.90

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 157 / 159

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Pitney Bowes

Nature of Debt (Purpose):
Postage

Mailing Address PO Box 856390

City State ZIP Code
Louisville KY 40285

Outstanding Balance Beginning This Period

0.00

Transaction ID: D87D4786A18704E3E866

Amount Incurred This Period

5522.57

Payment This Period

0.00

Outstanding Balance at Close of This Period

5522.57

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
IAFF FIREPAC

Nature of Debt (Purpose):
Transportation Costs

Mailing Address Attn: David B. Billy
1750 New York Ave, NW

City State ZIP Code
Washington DC 20006-5305

Outstanding Balance Beginning This Period

0.00

Transaction ID: DE8437A16695047AC84E

Amount Incurred This Period

32233.24

Payment This Period

0.00

Outstanding Balance at Close of This Period

32233.24

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
The Kirkwood

Nature of Debt (Purpose):
Rent

Mailing Address 400 Walnut Street

City State ZIP Code
Des Moines IA 50309

Outstanding Balance Beginning This Period

0.00

Transaction ID: DF06ED48AFB25453C90A

Amount Incurred This Period

757.17

Payment This Period

0.00

Outstanding Balance at Close of This Period

757.17

1) **SUBTOTALS** This Period This Page (optional).....

38512.98

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 158 / 159

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Verizon Corporate Real Estate

Nature of Debt (Purpose):
Rent

Mailing Address Mail Code FLG1-300
8800 Adamo Drive

City State ZIP Code
Tampa FL 33619

Outstanding Balance Beginning This Period

0.00

Transaction ID: D3856747E818749188BE

Amount Incurred This Period

23250.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

23250.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
UPS

Nature of Debt (Purpose):
Courier Service

Mailing Address PO Box 7247-0244

City State ZIP Code
Philadelphia PA 19170

Outstanding Balance Beginning This Period

0.00

Transaction ID: D42C8F3A7325E4A5A80E

Amount Incurred This Period

86.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

86.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Cedar Rapids Municipal Utilities

Nature of Debt (Purpose):
Utilities

Mailing Address PO Box 3255

City State ZIP Code
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

0.00

Transaction ID: D0E366AACBEEB484CB02

Amount Incurred This Period

53.51

Payment This Period

0.00

Outstanding Balance at Close of This Period

53.51

1) **SUBTOTALS** This Period This Page (optional).....

23390.01

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 159 / 159

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
The Des Moines Embassy ClubNature of Debt (Purpose):
Food & BeverageMailing Address 801 Grand Avenue
Suite 4000City State ZIP Code
Des Moines IA 50309-2762

Outstanding Balance Beginning This Period

0.00

Transaction ID: DDA7C5EA9B930420A98A

Amount Incurred This Period

4451.20

Payment This Period

0.00

Outstanding Balance at Close of This Period

4451.20

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Perkins CoieNature of Debt (Purpose):
Legal ServicesMailing Address Centralized Accounting Dept.
1201 Third Ave., 40th FloorCity State ZIP Code
Seattle WA 98101-3099

Outstanding Balance Beginning This Period

0.00

Transaction ID: D76E8E67033CC4385B66

Amount Incurred This Period

10000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10000.00

1) **SUBTOTALS** This Period This Page (optional).....

14451.20

2) **TOTALS** This Period (last page this line number only).....

485713.33

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

800854.79

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

1286568.12